

INTERPERSONAL THEMES IN ENCOUNTER GROUP
PROCESS AS A FUNCTION OF STYLE OF LEADERSHIP

By
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Abstract of Dissertation Presented to the
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INTERPERSONAL THEMES IN ENCOUNTER GROUP PROCESS
AS A FUNCTION OF STYLE OF LEADERSHIP

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The purpose of this study was to compare the effects of active and passive styles of encounter group leadership in terms of group process and outcome, particularly with respect to dependency.

The active leader initiates and is involved in interactions with group members. He plays an important role in structuring and defining the group. Additional characteristics were noted. Active leaders deal with dependency as an individual problem rather than a group phenomenon.

The passive leader attempts to maintain the interaction within the membership, maximize the members' role in providing their own structure, and increase members' awareness of the group process. Additional characteristics were noted. Passive leaders promote the expression of dependency and authority conflicts, assuming that bringing them to the fore is the best way to resolve them.

The Interpersonal Theme Analysis Technique (ITAT) and the Leader Interpersonal Behavior Scale (LIBS), modified versions of the interpersonal process research scales developed by Leary and others, were used to study leader and member behavior. Active and passive leaders were assumed to

differ in their interpersonal behavior. Different reciprocal behaviors were therefore expected from their respective groups. Specific differences were suggested.

Passively led groups, particularly short-term groups, were expected to show more signs of self-support and less need for dependency (environmental support) on termination than actively led groups. Changes in members' need patterns were studied with the Edwards Personal Preference Schedule (EPPS).

Fifty single undergraduates (28 males and 22 females) in six encounter groups that met for six weekly sessions were studied. The leaders were clinical and counseling doctoral students (males), best described as relatively inexperienced group leaders, although their level of experience is probably typical of graduate student "therapists" used in psychotherapy research. Leaders were designated as active or passive on the basis of their stylistic preferences. Both groups were matched for level of experience.

Relative frequencies of types of intervention were almost identical for both types of leadership except for support-seeking behavior, which passive leaders used five times more often. No significant differences were found when comparing member interpersonal behavior in the second and fifth sessions.

Pre-treatment EPPS differences were negligible. Few post-treatment changes were found. Actively led groups decreased in Dependency scores (Dependency equals Difference plus Succorance minus Autonomy Scale scores). Passively led groups increased slightly ($p < .05$). Autonomy and Succorance showed changes favoring the active condition ($p < .10$ and $p < .01$).

respectively). High dependency Ss decreased in dependency in both conditions. Low dependency Ss decreased in dependency only in the active condition. There were no significant pre-group differences based on sex. Dependency was the only significant post-group discriminant ($p < .05$). Males in the active condition showed the greatest reduction in dependency.

Several methodological problems need resolution before the hypotheses are rejected. Better quality control needs to be maintained to guarantee that the leaders are satisfactorily assuming their roles. The reliability and sensitivity of the judging should be increased. Weekly attendance of members must be stabilized. Stage of group development needs to be considered when comparing groups. Repeated outcome measures are needed. Suggestions were made to implement these recommendations.

The research potential of the ITAT and LBS was affirmed. Modifications were suggested. The value of the EPPS Dependency Scale as an outcome measure was also affirmed.

Although this study did not yield a satisfactory test of the hypothesis that leader or therapist activity promotes dependency and non-directivity decreases dependency, the results suggest that therapist activity per se does not increase dependency; it is the nature and quality of the activity that matters.

INTRODUCTION

Looking back on the history of group psychotherapy, Hunt (1964) optimistically reported that group therapy is now an accepted and important method of treatment and that the group therapy literature has become more meaningful over the years, partly as the result of the development of a more or less standardized descriptive vocabulary. Although his first conclusion would generally go unchallenged, the second one has not. The variety of types of groups has increased, creating a wealth of information and terminology that has not yet been assimilated by the professional community. Anderson (1969), in a critical review of the research literature, said that the proliferation of research related to group counseling has produced an "accumulation of bits of evidence" (p. 209) with little of the theoretical underpinning needed to give the practice of group counseling a solid ground. One review of "theories" of group development drawn from the group therapy and group dynamics literature listed 34 such theories, written in terms of each author's biases and largely based on intuitive observation (Hill, 1961). Thoresen (1969) described the situation in counseling theory, research, and practice as turmoil and chaos. To make matters worse, he complained, "Most studies, as they are conceptualized, designed, executed and analyzed, make no difference to counseling theory and practice" (p. 263). Hunt's conclusion is supported indirectly and in an unflattering way by Bednar's (1970) review which showed that of the

group studies published since 1945, those applying minimal research standards like controls, objective outcome criteria, and precise definitions of variables were all published since 1955, the average date being 1963.

With the emergence and growth of the "group dynamics" movement since World War II, a new dimension has been added to the problem of evaluating the effectiveness of groups with different patient populations and of evaluating the various styles of organizing them. The population for which group experiences are now available has been expanded to include so-called "normals" outside of the traditional therapy patient population. Through National Training Laboratory programs, "non-therapy" groups have been made available to businesses, schools, civic groups and presumably "healthy" individuals who are interested in learning more about the dynamics of groups and increasing their interpersonal sensitivity (Coghill, 1967). The growing acceptance and demand for groups that could satisfy the need for intense interpersonal contact and a sense of community in a society increasingly marked by rapid social change, disruption of the nuclear and extended family, and feelings of alienation has led to the evolution of the encounter group movement (Burton, 1969; Egan, 1970).

Although the encounter group movement has little of the formal organization that the sensitivity training-laboratory movement has, its current activity generally seems to concern helping individuals work through the barriers to personal and interpersonal growth and promoting self-actualization rather than with group phenomena per se and their organizational applications (Murphy, 1967). In actual practice these goals tend to overlap. These divisions within the group movement have tended

to cross-fertilize each other. Murphy (1967) reported that the Esalen movement has had a substantial impact on counseling and therapy, especially in groups. Egan (1970) reported several examples of the successful mixing of psychotherapy and training-laboratory concepts together in practice as justification for further experimentation. The same professionals sometimes participate in more than one type of group. Thus, group psychotherapy, training laboratories, and encounter groups have common roots, and often have common techniques and goals. Therefore the questions regarding methodology, group processes, styles of leadership, and outcome that arise in regard to one should be valid for the others also.

The need for more rigor and sophistication in psychotherapy research, particularly in group research, is a well-documented, long-standing observation made by many researchers. The major criticisms seem to be that even when the typically uninterpretable, "pre-experimental" case studies with N=1 are eliminated from consideration, the design of most experiments and outcome studies is weak and inadequate; previous findings and relevant research in other areas are frequently ignored; the variables are often simplistic, vague, poorly operationalized or difficult to replicate; criterion measures are often vague and unrelated to external criteria in the subjects' life space; and results are reported in a form that lacks generalizability or applicability, particularly to clinical work (Anderson, 1969; Bednar, 1970; Campbell & Dunnette, 1968; Dickenson & Truax, 1966; Edwards & Cronbach, 1952; Egan, 1970; Goldstein & Dean, 1966; Greenwald, 1967; Gundlach, 1967; McGrath & Altman, 1966; Thoresen, 1969; Tuckman, 1965; Zax & Klein, 1960; and others). Anderson (1969)

contended that many researchers contribute little or nothing to our pool of knowledge because they are still searching for The Truth. He offered Gundlach's summary of the literature as a counteractive to that motive: "There is no simple universal patient; there is no universal treatment named group therapy; and there is no simple universal outcome measure" (Gundlach, 1967, quoted in Anderson, 1969, p. 223).

In the area of individual and group therapy, as well as the burgeoning "non-therapy" encounter and laboratory group movements,* the relation of structure to function is not always clear, yet this is one of the two fundamental issues underlying therapeutic activity: what are the goals (functions) of therapy; how should therapy be structured to promote its goals? The effect of style of leadership (a structural variable) on group process is a problem that rarely has been addressed in the group literature and is more likely to be raised as a question than answered, either in a theoretical or an empirical way. Culbert (1968) remarked that research on the behavior of T-group trainers is "noticeably missing from the literature on T-groups.... This gap exists despite widespread acceptance of the T-group trainer as a key factor in group process" (p. 47). Goldberg (1970) stated that:

The behavior of the group leader seems to be the single most important variable in accounting for the variance in events and outcomes reported by the advocates of the various sensitivity training groups.... In canvassing the encounter group literature for comparative studies of leadership to answer such crucial questions as "optimal procedures for giving feedback, for

* Throughout this paper "therapy," "growth," "training (T)," and "encounter" are used interchangeably, as are "therapy group," "training group," and "encounter group." Although there are some differences, the investigator sees them as essentially the same.

enhancing feelings of psychological safety, and for stimulating individuals to try new behaviors" one is impressed by the paucity of such inquiries to date (pp. 2-3).

Egan (1970) called leadership style one of the critical variables in group outcome. When trying to summarize the effects of the leader he offered this qualifier: "It is difficult to specify leadership qualities in as restricted an area as laboratory training, for little has been done on leadership in such groups and leadership styles vary greatly... [*italics added*]" (p. 124). Garwood (1967) called the trainer a major force in what happens in sensitivity training. Stock (1964) noted that few studies have focused specifically on the role of the group leader and asked, "Can trainer interventions be classified, and what is their impact on the group?" (p. 410). The amount of structure that should be provided by the group leader is a subject for controversy in group counseling (Anderson, 1969) and group psychotherapy as well (Wallach & Strupp, 1964). Based on their attempts to study psychotherapy variables, Wallach and Strupp (1964) called for clarification of what therapist operations are, how to identify them, and what their relevance to therapy is. Culbert (1968) concluded that "the absence of trainer research is no oversight; it bespeaks the complexity of this research topic" (p. 47).

The published research in the area of therapist and leader variables as well as comparative group processes and outcomes has been limited. It has been dominated by the work of Carl Rogers and the students of non-directive, client-centered therapy (e.g., see Carkhuff & Truax, 1967) who have been attempting to define and validate the "necessary and sufficient conditions of therapeutic personality change"

(Rogers, 1957, p. 95). There have been a number of studies published that focus on aspects of the problem other than the relative presence or absence of accurate empathy, warmth, and genuineness. Most of them, however, deal with individual, not group therapy phenomena. Goldstein, Heller, and Sechrest (1966) studied the relation of group size and group interaction. They found that as group size increases, the interactions between and among the group members and the leader change. They suggested ending the all-too-common speculation about the matter with systematic research into the relation of group size to leader intervention. Culbert (1968) investigated the relation between leader self-disclosure and member growth in two T-groups. The high self-disclosing leader entered into more "perceived therapeutic relationships" with group members and the members of the low self-disclosing leader's group entered into more of such relationships with each other. Although both groups attained the same level of self-awareness by the end of the semester, those in the high leader disclosure group did so earlier. Coons (1957) compared two types of group therapy with a control group. The group in which warm interaction instead of personal difficulties was emphasized showed greater improvement than the insight-oriented group and the control group. Land (1963), also using hospitalized psychiatric patients, found an increase in patient interaction and group responding when the group leader used silence and redirection instead of active verbalization. This confirmed the earlier work of Salzberg (1961, 1962) and others. A study of college male underachievers (Gilbreath, 1967) showed that students with high dependency needs react more favorably to a leader-structured than to a

group-structured counseling group. A three-year follow-up (Chestnut & Gilbreath, 1969) showed that the difference (higher grade-point average) persisted. In another study of group counseling with underachievers (Dickenson & Truax, 1966), it was shown that the equivocal results in many other studies may have been the result of confounding high and low therapeutic conditions (i.e., combining the results of therapists rated high and low on accurate empathy, warmth, etc.). Following an investigation of trainer interventions in seven T-groups, Psathas and Hardert (1966) concluded that it is possible to compare trainers and groups in terms of the patterns and frequencies of implicit prescriptive and proscriptive norm-messages embedded in trainer communications.

A number of researchers have dealt with the effect of the leader on a group by studying leaderless and alternately led and unled groups. Exner (1965) found that irregular leader attendance benefited out-patient therapy group members. Salzberg (1967) compared the verbalizations of an actively led hospital psychotherapy group when the therapist was present and absent. Without the therapist the patients showed greater spontaneity, less problem-relevant responding, less interest in personal problems and more interest in other group members. Some patients spoke up more and some assumed leadership roles. Seligman and Sterne (1969) found that leaderless and alternate session groups showed more conventional, socially oriented behavior as measured by the Hill Interaction Matrix. Harrow, Astrachan, Becker, Miller, and Schwartz (1967) found that unled groups tended to be warmer and more supportive. In a study that clearly points out the lack of a simple direct relation between group process and outcome, Truax and Carkhuff (1964) found that when using alternate sessions with

juvenile delinquents some of the deepest levels of therapeutic process occurred during unled sessions, yet they made the same amount of progress on outcome measures as continuously led groups. In a study with neurotic out-patients they found the alternate sessions technique to be superior to continuous leader presence (Truax & Wargo, 1969), while the reverse proved true in a study with hospitalized patients (Truax, 1966). No published studies adequately account for these differences.

These studies demonstrate a growing interest in research on group differences based on leader intervention or group structure. One of their strengths is their recognition of the importance of research paradigms that compare and contrast the effects of different structural variables. Their weaknesses include a lack of specification of how their variables were operationalized. There is also a tendency to study variables one at a time (univariate design) and ignore the potential effects of others when making generalizations about the results. For example, data on group composition are rarely included (beyond a possible reference to diagnostic category or in/out patient status) yet this is probably an important source of experimental variance. Witness the disparate results among Truax' studies of unled groups (Truax, 1966; Truax & Carkhuff, 1964; and Truax & Wargo, 1969).

Although there does not seem to have been any deliberate attempt to systematically study the relation of leader-initiated structure and member personality, these studies, taken as a group, seem to be moving in that direction. Exner (1965), for example, speculated that the effect of unled group sessions could be explained in terms of forcing members to deal with their own dependency needs instead of transferring them to the

leader. He is attempting to replicate the study with more attention to this effect (Exner, 1970). Exner has not yet reported results, so Gilbreath's study (Gilbreath, 1967; Chestnut & Gilbreath, 1969) stands as one of the few, if not the only, group studies in which the effect of member dependency was investigated. This is surprising in light of the attention clinical literature has given to that phenomenon.

A survey of the literature showed that most studies of dependency involve dyadic rather than polyadic groups (i.e., "individual" vs. group therapy). A number of these seem relevant to this study. Heller and Goldstein (1961) cite theoretical literature that suggests that clients enter therapy feeling dependent and become more independent over time. They found that initial client dependency facilitates therapy and helps maintain the relationship. An analysis of therapists' approach-avoidance responses to client expression of dependency indicated that therapist's rate of approach is related to continuation of therapy (Winder, Ahmad, Bandura, & Rau, 1962). Alexander and Abeles (1968) found that clients whose dependency demands are not or cannot be met (because of their nature or intensity) terminate early. Heilbrun (1970) found that dependent females tend to receive non-directive responses from male therapists. Those who become sufficiently frustrated seek dependency gratification elsewhere and terminate therapy early. Dependent males tend to remain in non-directive therapy.

Alexander and Abeles (1969) expected female clients to express more dependency than males initially and throughout therapy with male therapists but found no difference. They also found that most types of dependency relationships (e.g., client-therapist, client-family) decrease

or level off by the time therapy is terminated (Alexander & Abeles, 1968). Snyder (1963) found an increase in dependency through the middle of therapy, followed by a steady decrease to the original level by the end of therapy. Schuldt (1964) found a small, constant decrease in expression of dependency, while Cartwright, Kirtner, and Fiske (1963) reported no change from beginning to end.

A number of individual therapy studies also deal with pertinent therapist variables. Ashby, Ford, Guernsey, and Guernsey (1957) studied the effects of a non-directive (reflective) and a leading (interpretive) type of therapy on counseling center clients. Interpretive therapy clients produced both more open and more guarded verbal behavior and were rated by the therapists in the study as showing greater improvement than reflective therapy clients. The effects of pre-therapy client personality also proved to be more important in interpretive than in reflective therapy. Using the same data Guernsey (1956) found no difference in within-session dependency behavior. Rottschaefer, also using college students, found that reflective counselors tended to evoke less client dependency behavior while fostering greater client responding (Rottschaefer, 1960; Rottschaefer & Renzaglia, 1962). After hypnotically inducing a "repressed" memory and potential negative countertransference, Gordon (1957) studied the effects of leading and following styles of therapy in uncovering the repression. The leading therapy resulted in greater and more accurate uncovering. The reflective therapy evoked the negative countertransference more often. In another study of reflective and interpretive therapy, in which a time limit was imposed on the therapists, it was demonstrated that good results could be obtained in about half the

time of therapy on which no limit was imposed. Both the Rogerian and Adlerian approaches showed a good deal of similarity when operating under the imposed structure of equal time limits (Schlien, 1964).

Based on the assumption that there are styles of therapy that cut across theoretical lines, several studies were conducted that analyzed psychotherapeutic techniques. Using therapists' reports of their usual practices, a group of investigators found three factors that differentiated therapists: (1) analytic vs. experiential (a general factor), (2) impersonal vs. personal affective approaches to patients, (3) active, directive vs. non-directive methods (McNair & Lorr, 1964; Sundland & Barker, 1962; Wallach & Strupp, 1964). Segal (1970) studied stylistic differences among "A" and "B" therapists. He described A's as more directive, interpretive, and negative. They assume responsibility for the structure and direction of the therapeutic process. He compared them to the "leading" type in Ashby et al. (1957). B's are more facilitative, more encouraging and less direct. They respond in a way that encourages greater expression by the client. B's tend to follow the client's lead rather than provide direction. Segal compared them to the "reflecting" type in Ashby et al.

The literature cited in the present study calls a number of traditional beliefs about therapy into question and also points to large gaps in our understanding of group process. For example, the role of insight in the relief of emotional distress and behavior change has been seriously questioned. The finding that group interaction per se can be more effective than insight gained (Coons, 1957) should be an embarrassment to those therapists who have not examined alternatives to insight-oriented therapy. One of the implications of Culbert's (1968) study is that high

self-disclosing group leaders can expect to obtain results equal to (and perhaps better than) those obtained by low self-disclosing leaders. If this is a reliable result, then leaders interested in shortening and/or enriching their groups could use this information to better implement their therapeutic goals. Gilbreath's (1967) approach to group counseling with underachievers is important since it demonstrates the potential productivity of therapeutic approaches that are molded to clients as they are instead of using the Procrustean strategy of "adjusting" clients to conform to the therapist's method (and discarding the mis-fits as "untreatable"). The effects of leaderless and alternate sessions lead to questions about the most effective ways of dealing with some problems and call for further examination by group leaders of their goals and how particular groups should be structured to maximally implement those goals. The confusion regarding the appropriateness of leaderless and alternate sessions and the contradictory findings about client dependency behavior over the course of therapy emphasize the need for more systematic study and reporting of population variables and more sophisticated, multivariate approaches to operational definitions and experimental design, as has been pointed out by Anderson (1969), Ashby et al. (1957), Cartwright et al. (1963), Heller and Goldstein (1961), Thoresen (1969), and others. The role of and need for dependency --- both as a group or "systems" phenomenon and as a personal phenomenon -- need to be clarified. What are the consequences of dependent behavior for the process and outcome of therapy? A last question, in keeping with the zeitgeist of contemporary psychology, is what do therapists actually do and what are the consequences? Hopefully, "my authority knew more than your authority" thinking is waning

and the empirical study of psychotherapeutic strategies is in its ascendancy.

DEFINITION OF THE PROBLEM

The focus of this study is the relation between group process and outcome and contrasting styles of leadership. From a review of current group and psychotherapy research literature, an attempt has been made to identify the salient features of this relationship as they are currently understood. It was concluded that the existing literature demonstrates that different styles of conducting groups are expected to, and indeed do, affect the process and outcome of groups. However these differences have not been systematically explored and general agreement on their effects and their desirability is lacking. This study is specifically concerned with the similarities and differences that result from conducting groups in an "active" and "passive" style especially with regard to the handling of dependency. The question of style cuts across theoretical approaches to therapy and represents an important distinction among therapists regardless of their professed affiliation.

Because of therapists' tendency to conceptualize what has occurred in therapy in terms of their own theoretical biases and professed affiliations, it would seem advisable to look at what has happened in terms that permit comparison as Fiedler (1950a, 1950b) did in his early comparative study. McNair and Lorr (1964), Sundland and Barker (1962), and Wallach and Strupp (1964) included "directive, active methods" as one of three factor-analytic dimensions along which therapeutic activity falls. Segal

(1970) studied the styles of A and B therapists and concluded that A's resemble the "leading" therapists studied by Ashby et al. (1957) and the "active" therapists described by Wallach and Strupp (1964). The same relation was suggested for B's, "reflective," and "passive" therapists. Land (1963), continuing the work of Salzberg (1961, 1962), contrasted an active, verbalizing therapist to one who employs silence and redirection as basic therapeutic interventions. Gilbreath (1967) had compared a high authoritarian leader who structured his group with a low authoritarian leader who allowed the members to structure the group. In his anthology of active psychotherapies, Greenwald (1967) concluded that therapist activity cannot be defined quantitatively as the number of therapist communications or the non-directive therapist who talks almost as much as his client would be classified as active. He felt that that would contradict his understanding of activity since the communications are limited to reflection of feelings. To Greenwald "active" is not synonymous with "directive," although there is a good deal of overlap. He understands the difference to be in terms of degree and attitude. The active therapist "tends to utilize consciously devised interventions for a specific pre-conceived goal.... This goal may be increased insight, decreased anxiety, the modification of overt behavior...[etc.]" (p. x).

Leadership styles are classified as being either active or passive relative to the interaction patterns typical of group members. Leadership style could be judged active or passive by such considerations as the amount of time the leader is the focus of attention, the number and duration of times the leader is involved in interactions with group members, the degree to which the leader establishes group norms, the extent

to which the leader acts to fulfill members' needs, the extent to which the leader deliberately intervenes in the group process to attain a specific goal or result, etc.

Two terms that clearly need defining are active and passive. They have been defined in this study relative to each other and to the behavior of a hypothetical average group member.

Active means causing or initiating movement or activity. It implies involvement. An active leader is one who by his behavior initiates and directs the course of group interactions and is involved in the interactions. The active leader plays an important role in structuring and defining the group by setting the rules of interaction, setting contingencies on member behavior, initiating and entering into interaction with group members, and by providing one or more behavioral models for group members. The active leader is directive in the sense that he makes suggestions and "sets the stage" so that the group process will be productive. Reflective statements by the leader are not considered indicators of high leader activity when they serve to maintain the interaction within the group membership rather than involving the leader in structuring and entering the ongoing group process.

Passive means not acting, not engaging in frequent, open action. A passive leader is one who attempts only minimally to direct the course of group interactions and whose involvement in the interactions is usually meant to focus attention on the group process. The passive leader tries to minimize his role in structuring and defining the group and maximize the members' role in providing their own structure. He provides few behavioral models for the group members. His role is largely in contrast to the role the typical group members are expected to assume. Reflective statements, questions (e.g., "How do you feel about that?"), and quiet reinforcement are typical strategies aimed at maintaining the interaction within the group membership.

Nothing here should be taken to imply that either style of leadership is at all times appropriate or of higher value than the other.

There is some risk in assigning leaders blanket labels like active or passive since consistency in style is not always attainable or desirable. Active leaders will occasionally behave passively and vice versa. The classification of a leader or therapist as active or passive is made, therefore, in terms of the relative proportions of these behaviors that he exhibits over the course of his group.

Although active and passive lack standard, conventional meanings in psychotherapy and group work, they and their approximate synonyms are frequently used in discussions of therapy. The strategies and goals associated with both of them have their supporters and detractors. To Rogers (1942), the directive "expert" hampers the development of independent and self-reliant client behavior and increases client dependency. The client-centered approach, which consists of reflecting or clarifying client feelings, simple acknowledgments, and silence, is alleged to give the client greater freedom to develop himself.

In passively led groups, the leader initially lets the group know verbally or non-verbally that it is their responsibility to decide the substance of the contract within which they are willing to work. By this method the goals of the group and the role of the leader become questions for the group, and the well anecdoted process of dealing with the leader and establishing a contract ensues (see e.g., Rennis & Shepard, 1956; Tuckman, 1965).

Non-directive strategies are not seen by all group leaders as the most productive in all situations. Egan (1970) believes that we are only

starting to find out what techniques are effective in what circumstances. Groups should be organized in terms of the participants' goals. He sees the relation between the leader and group members as being a contractual one in which the contract can be vague and implied or explicit and public. If one is concerned with demonstrating what happens when a group of people collect without clear goals or organization, then he believes that the unstructured, leaderless group is appropriate, for the natural dynamics of groups will become most evident and available for study in that way. If one is not interested in studying group process as an end in itself, then some variant of the contract group is called for. An initial contract (a tangible document in some cases), clearly specifying the rules and responsibilities of group participation, helps to bypass the conflicts about the contract that mark passively led groups. When the provisions of the contract relate to the interpersonal growth process, Egan claims this approach is the most appropriate and rewarding. Fagan (1970) commented that

...since this [member reaction to goallessness] is a systems effect, the leader cannot claim credit for having produced any special results, and the value to the participant is dubious. While the person whose electric supply is disrupted may be able to get along with candles and a fireplace, this demonstration of self-sufficiency is not what he is paying the power company to produce (p. 95).

In actively led groups, the attempt is typically made to decrease the intensity of this effect by acknowledging the problem or otherwise inhibiting its overt expression. It is allowed to arise as a personal issue for individual members rather than being made a group issue. The leader meets his primary contractual obligation to the group by providing

the structure it will need to facilitate its work and by setting the affective tone of the group (i.e., by being a model). Active leadership is based on the assumption that the group is more concerned with the interpersonal growth process than with systems phenomena, and more concerned with the outcome of the group than the experience per se.

The developmental growth of a passively led group is based on the members' experience of and ability to deal with ambiguity and goallessness. Initially, feelings of helplessness, frustration and dependence become prominent in the group. For some individuals, this is a rare opportunity to become aware of those feelings and deal with them. The resolution of conflicts regarding dependent and counterdependent behavior is a significant (some leaders would say the major) goal of groups (Bennis & Shepard, 1956). Initial goallessness is therefore essential to the purpose of these groups, which is, in part, to create its own goals (Benne, 1964; Bennis, 1964; Gibb, 1964). To promote this ambiguity the formal leader renounces control of the group, creating a leadership vacuum that evokes any unresolved authority and dependency conflicts existing in the group. Bernstein (1965) regards resolution of the transference problem (i.e., member dependency on the nominal authority figure in the group, the leader) as critical to growth and warns that unless the member-leader polarization is worked through, transference resistances may continually crop up or act as a brake on the group's progress. He advocates the strategy of aggravating the problem so that it can come to the fore to be dealt with.

The question of how to facilitate resolution of dependency in active groups has not been given the amount of attention that it deserves.

The consensus of active leaders seems to be that passive leadership magnifies the problem and that dependency can be handled in the same way any other problem is -- on an individual basis and in terms of that individual's conflicts (Egan, 1970). This is an unproven assumption that may be based on such diverse factors as leader preference for an active style, optimism based on success with other problems, or an unwillingness to deal with member dependency. There has apparently been no research done on the relation of these fundamental styles of group leadership to the resolution of dependency. The leader who does not deal in some way with the possible complications and limitations of his style may find himself engaging in anti-therapeutic, counterproductive activity that defeats the contract he is trying to fulfill. Shepherd (1970) warns that "a major hazard...is the therapist's assuming excessive responsibility for the direction of the group by too much activity, thus fostering patient passivity and defeating his own goal of patient self-support" (p. 237). To Egan (1970), one of the dangers of active leadership, especially when the leader has overinvested in being a "parent," is that the leadership skills of the members will not develop, increase, and get social reinforcement. Blake (1964) warns that the leader who clings to his role will promote excessive modeling of his behavior instead of the development of authentic response styles. His level and style of intervention is likely to become the standard for the group. Thus he could inhibit growing out of dependent modes of behaving and actually foster strong dependency on himself (for approval, permission, solutions, etc.). The diffusion of the leadership function throughout the group can, therefore, be a special problem for active leaders.

Hypotheses

The characteristics of active and passive leadership have not been sufficiently studied to permit reliable statements to be made concerning their similarities, differences, benefits, and shortcomings. Nor has it been made sufficiently clear how the benefits could be maximized and the problems minimized. Since a number of issues raised regarding leader-member relations, leader behavior, and group outcome concern the type and frequency of transactions that occur in groups, an analysis of those transactions (i.e., the group's interpersonal behavior) should provide the basis for the comparative study that has been suggested here. It is hypothesized that active and passive group leaders differ in their interpersonal behavior and that these differences affect member interpersonal behavior. Thus the interpersonal behavior of groups in the two conditions is expected to differ.

The predicted differences in the interpersonal behavior of active and passive leaders have been inferred from the formal definitions of active and passive stated earlier. The passive leader interacts with group members in a predominantly non-directive way. He reflects feelings and concerns, conveying his understanding of a situation, attempting to expand the members' awareness of what they seem to be experiencing or conveying to others, and encouraging them to explore their own feelings and reactions. This involves behavior that could be called teaching and supporting. One of the ways passive leaders frustrate the formation of dependent relations with them is by responding to support seeking by withholding the expected response. This could be in addition to or instead

of reflecting feelings, etc. Active leaders try to structure the group and are therefore more likely to respond in ways that convey structure. They set down guidelines for the interactions and remind members when the guidelines are not being followed. They suggest things to do and not to do. One of the ways active leaders achieve their goals and influence the group process is through the use of teaching, structuring, and punishing behavior (in the learning theory sense). Positive consequences are put on desired responses and negative consequences (disapproval, affective distance, sarcasm, etc.) are put on undesired responses, thereby shaping the group process. Therefore, it is hypothesized that active leaders use teaching, supporting, and punishing behavior to structure and influence group process. Passive leaders use teaching, supporting, and withholding behavior. Active leaders use more teaching than supporting and passive leaders use more supporting than teaching behavior. Active leaders use more actively punishing behavior and passive leaders use more withholding behavior.

The active leader, by virtue of his role in structuring groups and helping group members, is more likely to engender dependency upon himself that is not likely to be resolved in the course of the group. The passive leader, who, by his behavior, is more frustrating of the attempts of group members to create a dependent relationship, is less likely to have difficulty in this area. This does not lead to the conclusion that passive leaders are more effective overall, since time spent dealing with dependency is time taken away from other problems. The active leader is expected to deal more successfully with other difficulties in which his activity is facilitative.

The passive leader is more likely to evoke hostile, rejecting, and support-seeking themes at first since he is frustrating, not meeting, the support needs of his group. When members find that they can support themselves and each other, they do not need to seek the support of the leader and instead are more supportive of each other. The active leader is less likely to evoke hostility and resentment early in the course of his group since his activity will be meeting the group's support needs. However, the situation changes later in the group: members eventually demand more support than the leader is willing to give; members become anxious about their dependency; members begin to feel more comfortable and less dependent; members work through their need for dependency. This leads to what Bernstein (1965) described as transference resistances, wherein resentment and hostility is covertly or overtly expressed. This is sometimes seen as what could be called "attempts to dethrone the father/leader." Therefore, actively led groups are more likely to see an increase in hostile and rejecting behavior later in their development than passively led groups. Because of the potency of modeling effects and selective leader reinforcement, members of active groups also have the potential to exhibit more positive, supportive behavior if and when they reduce their need for dependency -- either as a group or singly.

An outcome criterion that is relevant to this study is change in what Perls (1970) calls self-support -- that is, doing for oneself whatever one is capable of, instead of manipulating others into doing it; taking responsibility for oneself. He describes maturation (emotional and biological) as "the development from environmental support to self-support" (p. 17). Elsewhere, Hartley and Rosentaum (1963) found great unanimity in

the use of self-acceptance, self-confidence, and self-reliance as criteria for patient improvement among the group psychotherapists they surveyed. Need for environmental support would appear to be a good definition of dependency and self-support would appear to be an appropriate and accepted criterion of a favorable group outcome. Since it has been suggested that passive leadership frustrates and reduces the need for dependent behavior, outcome measures of need for dependency or environmental support should show a greater reduction in those needs in passively led groups than in actively led groups. This would be particularly true of short-term groups. If the members of an actively led group are able to successfully deal with their dependency (either collectively or singly), then the reverse relation would be true: both types of groups would show a decrease in dependency and the actively led group would show the greater change. This later effect would probably be most evident in long-term groups.

H. A. Murray (1938) and others devised a categorization for use in studying normal personalities. Edwards (1959), using Murray's definitions of universal human needs, developed a personality survey designed to measure those needs in a standardized, objective manner (Edwards Personal Preference Schedule). Since the participants in groups are assumed to differ in the degree to which they manifest the various interpersonal needs, and a good deal of group activity centers around increasing awareness of interpersonal needs and finding appropriate satisfaction and expression of them, it is felt that examining changes in need patterns will be a useful method of studying the effects of participating in encounter or therapy groups. Previous research has indicated that there are changes in self-report of interpersonal needs following successful therapy. Increases are

reported on the Autonomy and Nurturance Scales, while decreases are reported on the Succorance and Dependency Scales (Heller & Goldstein, 1961). Since several of the Edwards Personal Preference Schedule (EPPS) variables could be said to measure a need for environmental support and a need for self-support, the EPPS would appear to be a suitable self-administered measure of therapy or group outcome. The Dependency Scale in particular seems suited to this project. Its use was suggested by the work of several researchers (Heller & Goldstein, 1961; Bernardin & Jessor, 1957; Gisvold, 1958; Zuckerman & Grosz, 1958). The Dependency score is the algebraic sum of the Succorance and Deference scores less the Autonomy score.

The research work of the Kaiser Research Foundation during the early 1950's has been described as "the most impressive body of empirical research about the network of interpersonal effects stimulated by the behaviors of Ss in interaction...." (Mueller, 1969a, p. 4). This study followed the lead of Leary, Freedman, LaForge, and others (Freedman, Leary, Ossorio, & Coffey, 1951; LaForge, Leary, Naboisek, Coffey, & Freedman, 1954; LaForge & Suczek, 1955; Leary, 1957) in approaching process research through the study of interpersonal behavior. This research group developed and applied interpersonal research schemata and instruments to a variety of subjects. Other researchers have applied their work to family interactions and psychotherapy (Mueller, 1969a, 1969b; Mueller & Dilling, 1968, 1969; Terrill & Terrill, 1965; and others).

The basic assumption of this approach is that one individual's behavior will elicit predictable responses from the other participant(s) in the system (originally, a dyad). The affective component of

interpersonal behavior is also referred to as the interpersonal theme. Interpersonal themes are defined as those attempts of an individual to establish emotional states in his interactions that tend to elicit predictable responses from others (Mueller & Dilling, 1969). In other words, the "medium" really is the "message."

An additional assumption of interpersonal theme analysis is that when individuals are in interaction (e.g., in therapy), they will learn which behaviors are rewarded and which are punished. In the therapy or group situation, the effect of such learning on the client or member is to modify his behavior in the direction of more successful response patterns (i.e., successful with the therapist, group leader, and group members). (The therapist is acknowledged to change also; however his continuing experience with the therapy situation will reduce the effect of any particular experience as a function of the reinforcement schedules he is subjected to in his work.)

According to this method, behaviors are described as interpersonally-oriented responses which can be plotted around a circumplex and defined in terms of two major axes: a dominant-submissive axis and an affiliative-disaffiliative axis (LaForge & Suczek, 1955). The basic proposition of the system is that all responses can be plotted in terms of these two major axes and that these axes are sufficient to explain most interpersonal behavior (Mueller, 1969a, p. 8).

The intersection of the dominant-submissive and affiliative-disaffiliative axes yields four major quadrants that can be further divided into octants and sixteenths (i.e., single categories). The four quadrants are: (I) Dominant-Disaffiliative, descriptively referred to as competitive-hostile; (II) Submissive-Disaffiliative, descriptively referred to as passive-resistant; (III) Submissive-Affiliative, descriptively

referred to as support seeking; (IV) Dominant-Affiliative, descriptively referred to as supportive-interpretive. The four octants that are expected to describe the themes of most leader interpersonal behavior are: Punish-Hate, relabeled Punishing; Boast-Reject, relabeled Distancing; Dominate-Teach, relabeled Teaching; Give-Support, relabeled Supporting. Punishing and Distancing comprise Quadrant I; Teaching and Supporting comprise Quadrant IV. The 16 interpersonal behavior categories are described by a circumplex showing their relation to each other and the major axes (see Appendix 4 for an adaption of the original circumplex and definitions of the themes).

One of the advantages of the Interpersonal Theme Analysis Technique (ITAT) is the flexibility it offers. For the purposes of this study, behavior was analyzed by quadrant categories and, in some cases, by octant. Themes could also be judged by hemisphere or by single categories. Themes could be judged according to level of accessibility (public, conscious, and private levels), degree of intensity (Freedman, et al., 1951), or whether they were self-self, self-therapist, or self-other interactions (Mueller, 1969a).

The hypotheses that have been stated informally earlier were operationalized through the use of the Interpersonal Theme Analysis Technique (ITAT), the Leader Interpersonal Behavior Scale (LIBS) -- a modified version of the ITAT designed to study leader-appropriate themes, and the Edwards Personal Preference Schedule (EPPS). The first group of hypotheses concerns the difference between the types of interpersonal themes expressed by active leaders (ALs) and passive leaders (PLs) and their respective groups. The second group of hypotheses concerns

differences in the outcome of groups in each condition, especially with regard to dependency and self-support.

Hypothesis 1: Leaders are expected to differ in the number of times they intervene in their respective groups. For the number of leader themes recorded, the specific hypothesized outcome is

AL > PL, for number of leader interventions.

Hypothesis 2: Leaders are expected to differ in the types and frequency of interpersonal themes expressed, as measured by the LIPS.

The specific hypothesized outcome is

Teaching Themes > Supporting Themes, for AL
Teaching Themes < Supporting Themes, for PL
Punishing Themes > Withholding Themes,* for AL
Punishing Themes < Withholding Themes, for PL
AL > PL, for Teaching Themes
AL < PL, for Supporting Themes
AL > PL, for Punishing Themes
AL < PL, for Withholding Themes.

Hypothesis 3: Groups are expected to differ in the frequency of interpersonal themes expressed, as measured by the ITAT, when stage of group development is considered. More disaffiliative and support-seeking themes and fewer supportive, affiliative themes will be found early in passively led groups. The reverse will be true for actively led groups. The specific hypothesized outcome is

A < P, for proportions of themes in Quadrants I, II, III during an early session
A > P, for proportion of themes in Quadrant IV during an early session
A > P, for proportions of themes in Quadrants I, II, III during a late session
A < P, for proportion of themes in Quadrant IV during a late session.

Hypothesis 4: Groups are expected to differ in the amount of change they show on measures of dependency and environmental versus self-support. Groups in the active condition will show less

* Withholding themes are classified as "C" or "F" ITAT themes depending on the degree and overtness of the withholding behavior. These correspond to "Distancing" and "Submissive Disaffiliation" on the LIPS. The relationship should hold true in both categories.

change than groups in the passive condition on the EPPS Dependency Scale (Deference + Succorance - Autonomy T scores) and on several scales that are hypothesized to measure the need for environmental support. Scales that measure other interpersonal needs will show no differences between groups or will show greater change in the active condition. The specific hypothesized outcome is

A < P, for change in EPPS Dependency Scale scores

A < P, for change in EPPS Achievement, Autonomy, Nurturance, and Dominance Scale scores

A < P, for change in EPPS Deference, Succorance, and Abasement Scale scores

A ≥ P, for change in EPPS Order, Exhibition, Affiliation, Intracception, Change, Endurance, Heterosexuality, and Aggression Scale scores.

Hypothesis 5: In addition to overall differences in outcome between subjects (Ss) in the active and passive condition, individuals rated high and low on dependency on initial testing are expected to show different rates of change in Dependency Scale (DPY) score on second testing. High dependency is defined as a T score of 51 or above on the Dependency Scale; Low dependency is a T score of 49 or below. The specific hypothesized outcome is

A < P, for change in DPY in High DPY group

A > P, for change in DPY in Low DPY group.

The hypotheses were tested using the .05 level of alpha as the criterion for statistical significance. Results obtained at that level ($p \leq .05$) have been marked with an asterisk; other significance levels mentioned below are used for descriptive purposes and to suggest trends worthy of further study.

METHODOLOGY

Ten encounter groups, consisting of one leader and 12 members, were organized. The participants were single male and female undergraduates who had expressed interest in being in an encounter group and met these criteria (see Appendix 1): willingness to participate in the research aspects of the project, not concurrently in therapy, and not in more than one encounter group previously. Participants were told that any benefits they received from the groups would be personal; no experimental credit was involved. An equal number of males and females were assigned to each group. The groups met for six weekly sessions that typically lasted from two to two-and-one-half hours. Some new members were added at the second session but none were added after that. The six groups that had maintained the most regular and stable membership (average $n = 8$) were included in the data analysis. The total sample ($N = 50$) consisted of 28 males and 22 females.

The groups were to be run in accordance with the guidelines laid down in the leader's manual (Appendix 2). Non-verbal exercises were discouraged unless they spontaneously emerged from the group process in order that the groups closely resemble therapy groups, be as uniform as possible within each experimental condition, and that the maximum amount of interaction be recorded and available for later study.

The group leaders were second and third year male doctoral students

in clinical or counseling psychology who had had prior experience with groups (mostly as members) plus experience with individual therapy or counseling. They are best described as relatively inexperienced group leaders although their level of experience is probably typical of graduate student "therapists" used in psychotherapy research. Prior to and concurrently with the encounter groups, the leaders participated in a didactic encounter group designed to familiarize them with the techniques and styles they were to employ in the groups, deal with the problems that arose, and familiarize them with the styles of some experienced encounter group leaders. The information they needed was also summarized in a manual prepared by the present investigator with which they were expected to become familiar (Appendices 2 and 3). After the initial sessions, during which the active-passive distinction was explained, the leaders were designated as active or passive. This was done on the basis of their stylistic preferences and amount of previous experience so that both groups were approximately matched for level of experience. Although the leaders were aware that active and passive leadership was being studied, they were not told the hypotheses or method of analysis used.

The Edwards Personal Preference Schedule (EPPS) was administered to participants before their first session and after the sixth. Only the data of those participants who had completed both EPPS and had attended at least three sessions (never missing two consecutive ones) were included in the data analysis.

The sessions were all audiotaped. The process analysis was based on portions* of the tapes of an early and late session (the second and

* Miller and Maley (1969) found that consecutive time samples and shorter

fifth). Thirty minute samples were taken from each tape (approximately 25% of each session). The samples were composed of ten-minute segments taken at pre-fixed intervals (ten minutes after the beginning, ten minutes before the end, and five minutes before and after the midpoint). The tapes were analyzed using the Interpersonal Theme Analysis Technique (ITAT) described by Mueller (Mueller, 1969a, 1969b; Mueller and Dilling, 1969). The tape was rated in 60-second units. Leader interventions were analyzed within their original context and separately. A tape consisting of the cumulated first minute of leader interventions from each segment (six minutes per leader) plus a brief, contextual lead-in and lead-out was composed and analyzed using the Leader Interpersonal Behavior Scale (LIBS), a variation of the ITAT designed for this study (see Appendix 6). The tape was rated in 30-second units.

The tapes of the six groups were rated by three judges as to which category the groups' interpersonal themes fell into. Although ratings were made independently, the lack of a written transcript made it necessary for the judges to first agree on the number of scorable units they heard, which actor(s) they were rating, and in what sequence. The number of scorable units was not always immediately and universally obvious since the judges had to consider the number of speakers in the time sample, and the intensity and duration of their verbalizations. The rule of thumb followed was that context superseded affect, affect superseded content and intensity superseded duration. If the judges disagreed on the number of different units, the maximum number proposed was used and the judge(s) who

but randomized time samples both can generate the same representative information about the total group session. Consecutive sampling at pre-fixed intervals was felt to be most appropriate in this study.

proposed smaller numbers repeated their scoring to indicate that all the units were similar in their estimation. Disagreements were typically between the use of one or two units when it was questioned whether or not a new theme had emerged. This method made it quite clear what judges were rating and agreeing on. The final ratings consisted of agreement by two of the three judges. Units for which no consensus could be reached were rated "unclassifiable" (Appendix 5).

The criterion level for rater reliability, based on the results of previous studies (Freedman et al., 1951; Mueller, 1969a; Terrill & Terrill, 1965), was set at a minimum of 60% for two-judge agreement. This represents "moderate" agreement. Agreement of 80% or greater represents "high" agreement.

Prior to the actual rating, several students were familiarized with the rating technique and the scoring categories using a slightly elaborated version of the scoring manual developed by Crowder (1970) under Mueller's supervision (Appendix 4). Practice tapes were rated and difficult units were discussed. The three students with the highest level of interagreement and agreement with the investigator were selected as judges. One was a doctoral student in Educational Psychology, one a doctoral student in Personnel Services, and one a senior in Psychology. Two were female and one was male. The judges listened to the tapes in a randomized order and they were not informed of the hypotheses or experimental design during the judging period. For their last task, producing an empirical ranking* of the leaders on activity-passivity, they were

* All pairs of leader segments were ranked using the forced-choice method.

familiarized with the "Definitions" handout (Appendix 3). This was their only exposure to the overall design of the project.

RESULTS

Process Measures

The ratings on which the data analysis rested are believed to be reliable since the per cent of agreement among judges ranged from moderate to high. A 25% sample of the tapes rated using the ITAT (consisting of three tapes, one rated in each third of the rating group's life) showed that the average agreement between any two judges was 91.5% and the average agreement among all three judges was 48.1%. Using the LIES, the average judge agreement over a 50% sample (every other session) of leader tape was 69.7% for two judges and 39.7% for three judges (Table 1).

The judges ranked the segments of the leader tape on activity-passivity. There was complete agreement on which leaders were active and which were passive. The rank order was agreed to be identical in the early and late session except for the inversion by one judge of two rankings within the passive condition (Table 2). Comments by the judges suggested that their rankings were based in large measure on differences in voice qualities (volume and forcefulness) and frequency of verbal interventions rather than on differences in some of the formal defining qualities of active and passive leadership.

TABLE 1

Per Cent of Judge Agreement on the Process Rating Scales

Sample	% 2-Judge Agreement	% 3-Judge Agreement
<u>Interpersonal Theme Analysis Technique</u>		
A1-I	87.7	44.9
P1-I	93.0	42.0
P3-II	93.7	57.4
	Mean = 91.5	Mean = 48.1
<u>Leader Interpersonal Behavior Scale</u>		
A1-I	64.0	64.0
A3-I	64.0	29.0
P2-I	67.0	28.0
A1-II	71.0	32.0
A3-II	73.0	42.0
P2-II	79.0	43.0
	Mean = 69.7	Mean = 39.7

TABLE 2

Judges' Forced-Choice Rankings of Leaders on Activity-Passivity

<u>Early Session</u>			<u>Late Session</u>		
Judge 1	Judge 2	Judge 3	Judge 1	Judge 2	Judge 3
A3	A3	A3	A3	A3	A3
A2	A2	A2	A2	A2	A2
A1	A1	A1	A1	A1	A1
P2	P2	P2	P3	P3	<u>P2</u>
P3	P3	P3	P2	P2	<u>P3</u>
P1	P1	P1	P1	P1	P1

Note. -- Disagreements underlined.

The 15 pairs of leader segments were analyzed for each session
 $[N = n(n-1)/2]$.

Hypothesis 1

Table 3 indicates that the active leaders were judged to have made 50% more interventions during the cumulated six minutes of leader tape than the passive leaders. That is, within the same space of time, the active leaders used a greater number of interpersonal behaviors in their transactions with group members. Using the average number of interventions calculated over complete sessions, active leaders intervened almost 80% more than passive leaders (Table 4).

Hypothesis 2

Although the active leaders used a greater number of interpersonal behaviors than passive leaders, they had almost identical relative frequencies in five of the six LIRS categories (Table 3). Passive leaders were rated as using five times as many Submissive-Affiliative themes as active leaders. Visual inspection of Table 3 indicates that the within-group variance would exceed the between-group variance in this analysis.

All leaders used Teaching more than Supporting. This was not predicted for passive leaders. Both groups used Distancing (the only obtained sample of Withholding) more than Punishing, which was not predicted for active leaders.

Hypothesis 3

A mixed model analysis of variance using condition (active-passive), session (early-late), and groups (replications nested in condition) as variables showed little difference in the group process (Tables 5 and 6; Appendix 7). Since the data were gathered as proportions of responses in

TABLE 3

Analysis of Cumulated First Minute of Leader Interventions from an Early and Late Session Using the Leader Interpersonal Behavior Scale

Group	n	Theme					
		Punishing	Distancing	Teaching	Supporting	Submissive Affiliative	Submis- sive-Dis- affiliative
A1	37	3	1	16	15	2	0
A2	25	0	7	15	3	0	0
A3	28	3	4	16	5	0	0
N = 90		6	12	47	23	2	0
P1	9	0	0	3	1	5	0
P2	23	2	3	14	4	0	0
P3	29	1	4	15	7	2	0
N = 61		3	7	32	12	7	0
Proportion of N							
Active		.067	.133	.522	.255	.022	.000
Passive		.050	.111	.533	.200	.111	.000

TABLE 4

Number of Leader Interventions in Early(I) and Late(II) Session
Samples Using the Interpersonal Theme Analysis Technique

Group	Session		Group	Session	
	I	II		I	II
A1	11	21	P1	8	5
A2	25	19	P2	13	11
A3	12	19	P3	13	10
n = 48		n = 59	n = 34		n = 26
Mean = 16		Mean = 19.67	Mean = 11.33		Mean = 8.67
Active Group: N = 107			Passive Group: N = 60		
Mean = 17.83			Mean = 10		

TABLE 5

Interpersonal Theme Analysis Technique: Quadrant Analysis
Cell Means

All (Member & Leader) Statements

	I		K		K		Active Passive	I
	Active	Passive	Early	Late	Early	Late		
Quadrant I	1.05	1.28	1.11	1.22	.98 1.25	1.12 1.31		
Quadrant II	.61	.76	.72	.65	.72 .73	.51 .79		
Quadrant III	.99	1.03	1.10	.91	1.06 1.14	.91 .91		
Quadrant IV	1.37	1.04	1.17	1.24	1.32 1.02	1.42 1.07		

Member Statements

Quadrant I	1.20	1.38	1.18	1.40	1.04 1.33	1.36 1.44
Quadrant II	.79	.80	.80	.78	.87 .74	.72 .85
Quadrant III	1.24	1.12	1.27	1.09	1.30 1.24	1.18 .99
Quadrant IV	.82	.74	.76	.80	.86 .66	.78 .82

TABLE 6

Interpersonal Theme Analysis Technique: Quadrant Analysis

Source	All (Member & Leader) Statements							
	I		II		III		IV	
	Mean Square	F	Mean Square	F	Mean Square	F	Mean Square	F
Condition (I)	.1596	1.07	.0638	1.18	.0049	.07	.3219	3.33
Session (K)	.0337	.55	.0187	.82	.1079	7.56*	.0167	.52
Groups in Condition I(J)	.1489		.0530		.0660		.0968	
IK	.0049	.08	.0551	2.42	.0044	.31	.0019	.06
I(J)K	.0614		.0227		.0143		.0320	
Member Statements								
Condition (I)	.0991	.59	.0001	.00	.0426	.35	.0180	.42
Session (K)	.1352	3.56	.0009	.02	.1049	3.01	.0039	.07
Groups in Condition I(J)	.1680		.3702		.4801		.0426	
IK	.0327	.86	.0507	1.05	.0122	.35	.0402	.78
I(J)K	.0379		.1930		.1392		.0516	

$F_{.90}(1,4) = 4.54$; $F_{.95}(1,4) = 7.71$, $F_{.99} = 21.20$

* $p < .10$

** $p < .05$

*** $p < .01$

each quadrant, they were subjected to the square root of the arc sine transformation recommended by Winer (1962). Proportions were calculated using all scorable responses within the time samples and using the member themes only. This allowed for analysis of the total pattern of leader-member interaction as well as for member pattern alone.

Analyzing member and leader themes together, no differences were found comparing active and passive conditions in the early and late session in Quadrants I, II, or IV. There was a decrease in Submissive-Affiliative (support-seeking) themes ($p < .10$) that closely approached significance. Analysis of member themes alone showed no significant results. The analysis of Quadrant III supports the hypothesis that groups decrease in support seeking over time, although no difference could be attributed to style of leadership. In fact, the leaders must have decreased support-seeking behavior also.

Outcome Measures

A comparison of F values for scores on the 17 EPPS scales (Table 9) shows that pre-treatment differences between active and passive groups were negligible, with the exception of Exhibition, on which group members in the passive condition tended to score higher ($p < .05$), and Aggression, on which group members in the active condition tended to score higher ($p < .10$). The stepwise discriminant function analysis (Table 9) indicated that the active and passive group could be differentiated beyond $p = .05$ primarily based on differences in Exhibition Scale scores. To control for this difference as well as other minor sample variations, difference scores were used in analyzing post-treatment changes.

Note. -- Scale abbreviations stand for (1) Achievement, (2) Deference, (3) Order, (4) Exhibition, (5) Autonomy, (6) Affiliation, (7) Intraception, (8) Succrance, (9) Dominance, (10) Abasement, (11) Nurturance, (12) Change, (13) Endurance, (14) Heterosexuality, (15) Aggression, (16) Consistency, (17) Dependence [(2) + (8) - (5) = (17)].

TABLE 7

Edwards Personal Preference Schedule
Means and Standard Deviations:

Pretest

Scale	Active Condition (n=24)		Passive Condition (n=26)		All Ss (N=50) Grand Mean
	Mean	S.D.	Mean	S.D.	
(1)ACH	46.29	12.94	46.38	7.76	46.34
(2)DEF	40.46	9.59	41.42	9.65	40.96
(3)ORD	42.46	8.47	41.50	8.59	41.96
(4)EXH	46.75	6.04	52.62	10.18	47.80
(5)AUT	58.67	10.68	56.92	8.80	57.76
(6)AFF	52.17	10.17	54.81	8.72	53.54
(7)INT	55.04	9.88	51.96	8.99	53.44
(8)SUC	55.96	9.67	54.35	10.26	55.12
(9)DOM	42.42	9.78	42.73	10.06	42.58
(10)ABA	48.67	9.23	50.58	11.21	49.66
(11)NUR	54.58	11.30	54.81	8.85	54.70
(12)CHG	54.92	7.89	53.31	8.88	54.08
(13)END	42.71	8.59	44.12	10.90	43.44
(14)HET	53.62	9.33	55.15	7.10	54.42
(15)AGG	52.79	8.94	47.81	10.48	50.20
(16)CON	53.25	6.65	53.00	9.98	53.12
(17)DPY	37.75	19.47	38.85	16.86	38.32

Posttest

(1)ACH	45.71	10.80	49.04	9.34	47.44
(2)DEF	38.80	10.38	42.58	10.77	40.76
(3)ORD	38.92	5.39	42.38	10.46	40.72
(4)EXH	49.33	9.54	47.62	8.09	48.44
(5)AUT	62.37	11.02	58.54	8.28	60.38
(6)AFF	53.04	11.22	54.23	8.31	53.66
(7)INT	54.87	7.77	52.86	10.23	53.62
(8)SUC	52.75	10.37	57.38	8.74	55.16
(9)DOM	45.08	9.38	42.46	11.19	43.72
(10)ABA	47.58	10.64	48.04	11.07	47.82
(11)NUR	56.46	10.49	57.65	10.12	57.08
(12)CHG	53.29	9.19	50.42	11.47	51.80
(13)END	43.67	8.37	44.12	9.55	43.90
(14)HET	53.42	10.88	53.65	6.81	53.54
(15)AGG	52.79	9.24	47.58	11.27	50.08
(16)CON	53.92	12.97	49.23	14.75	51.48
(17)DPY	29.92	17.69	42.58	14.41	36.50

Edwards Personal Preference Schedule Means and Standard Deviations by Ss' Sex:

-45-

TABLE 9

Values of F for Edwards Personal Preference Schedule
Discriminant Function Analyses

Active x Passive Condition				
<u>Pretest</u>				
(1)ACH .00	(5)AUT .40	(9)DOM .01	(13)END .25	(17)DPY .05
(2)DEF .13	(6)AFF .98	(10)ABA .43	(14)HET .43	
(3)ORD .16	(7)INT 1.33	(11)NUR .01	(15)AGG 3.24*	
(4)EXH 6.01**	(8)SUC .33	(12)CHG .46	(16)CON .01	
<u>Posttest</u>				
(1)ACH 1.37	(5)AUT 1.96	(9)DOM .80	(13)END .03	(17)DPY 7.75***
(2)DEF 1.60	(6)AFF .18	(10)ABA .03	(14)HET .01	
(3)ORD 2.12	(7)INT .87	(11)NUR .17	(15)AGG 3.17*	
(4)EXH .47	(8)SUC 2.94*	(12)CHG .94	(16)CON 1.41	

$$F_{.90}(1,40) = 2.84; F_{.95}(1,40) = 4.08; F_{.99}(1,40) = 7.31.$$

Condition x Sex (Active-Passive x Male-Female)				
<u>Pretest</u>				
(1)ACH .31	(5)AUT 1.06	(9)DOM 1.36	(13)END 1.45	(17)DPY 1.96
(2)DEF 2.12	(6)AFF .37	(10)ABA .68	(14)HET 1.61	
(3)ORD .24	(7)INT .62	(11)NUR .41	(15)AGG 1.15	
(4)EXH 2.04	(8)SUC .56	(12)CHG 1.19	(16)CON .45	
<u>Posttest</u>				
(1)ACH 1.14	(5)AUT .67	(9)DOM 1.34	(13)END .09	(17)DPY 3.65**
(2)DEF 2.16	(6)AFF 1.01	(10)AGA 1.23	(14)HET .74	
(3)ORD .83	(7)INT .40	(11)NUR .11	(15)AGG 1.88	
(4)EXH .34	(8)SUC 1.50	(12)CHG 1.39	(16)CON 1.31	

$$F_{.90}(3,40) = 2.23; F_{.95}(3,40) = 2.84; F_{.99}(3,40) = 4.31.$$

#p < .10
**p < .05
***p < .01

Hypothesis 4

Analyses of variance for all of the EPPS scales (Table 10) using pre-group/post-group difference scores indicate few changes in need structure immediately following the encounter groups. The actively led groups showed a decrease in Dependency Scale scores and the passively led groups showed a slight increase. This difference, significant beyond the .05 level, was contrary to expectation. Autonomy and Succorance, components of the Dependency Scale, showed changes favoring the active condition ($p < .10$ and $p < .01$ respectively), also contrary to expectation. The only component of the Dependency Scale that showed no change was Deference. Exhibition, on which members of passively led groups originally had the higher mean, showed a decrease for that group and a slight increase for members of actively led groups. The net change, by which both groups moved closer to a mean T score of 50, was significant slightly above the .01 level. The greater amount of change in the passively led groups was contrary to expectation.

A stepwise discriminant function analysis of EPPS posttest scores (Table 9) showed that the groups could no longer be differentiated on Exhibition but could be on the basis of Succorance ($p < .10$), Aggression ($p < .10$, as before), and Dependency ($p < .01$), the best post-encounter group discriminant.

The EPPS variables were also analyzed by sex-within-group to determine if any systematic male-female differences existed (Table 9). No significant pre-group differences were found. Dependency was the only variable that significantly differentiated the groups ($p < .05$). Both males and females in the passive condition showed slight increases in

TABLE 10

Edwards Personal Preference Schedule Pretest-Posttest Differences
Analyses of Variance

Scale	Condition	Mean Square		F	df	P
		Groups in	Condition			
(1)ACH	147.35	52.33	86.81	2.83	1,4	N.S.
(2)DEF	84.14	48.84	103.05	1.72	1,4	N.S.
(3)OFD	283.81	107.76	45.56	2.63	1,4	N.S.
(4)EXH	769.44	39.16	82.70	19.65	1,4	**
(5)AUT	53.02	9.36	75.05	5.67	1,4	*
(6)AFF	13.72	64.75	45.94	.21	1,4	N.S.
(7)INT	3.15	19.12	63.88	.16	1,4	N.S.
(8)SUC	522.63	22.15	80.77	23.59	1,4	***
(9)DOM	101.12	42.99	57.18	2.35	1,4	N.S.
(10)ABA	35.29	18.15	71.73	1.94	1,4	N.S.
(11)NUR	3.58	20.02	73.04	.18	1,4	N.S.
(12)CHG	21.55	47.87	70.09	.45	1,4	N.S.
(13)END	5.92	37.04	63.06	.16	1,4	N.S.
(14)HET	14.42	58.47	61.18	.25	1,4	N.S.
(15)AGG	4.14	48.12	70.45	.09	1,4	N.S.
(16)CON	233.31	328.41	159.43	.71	1,4	N.S.
(17)DPY	1080.68	102.49	313.05	10.54	1,4	**

$F_{.99}(1,4) = 4.54$; $F_{.95}(1,4) = 7.71$; $F_{.99}(1,4) = 21.20$.

* $p < .10$
 ** $p < .05$
 *** $p < .01$

Dependency score. Females in the active condition already had the lowest mean Dependency score ($\bar{T} = 27.6$), which decreased only slightly. The greatest change was in the males in the active condition. Their mean dropped from 45 to 34.

Hypothesis 5

A two-way analysis of degree of dependency by group (Table 11) showed that the differential effects of the active and passive conditions failed to reach the .05 level of significance. The relative change among high and low dependency group members is significant beyond the .10 level. High dependency group members apparently decreased in Dependency score no matter what group they were in, offsetting the differences among low dependency group members, who showed an overall decrease in the active condition and an increase in the passive condition. The second part of this hypothesis received some confirmation in that low dependency group members showed more constructive change when in actively led groups.

TABLE 11

Analysis of Variance for Pretest-Posttest Dependency Scores
of High and Low Dependency Ss

Source	Mean Square	<u>F</u>	<u>df</u>	<u>P</u>
Condition (I)	825.32	3.73	1	N.S.
Level of DF(K)	1249.33	7.01	1	*
Groups in Condition I(J)	221.27		4	
IK	424.60	2.38	1	N.S.
I(J)K	178.13		4	
Within	292.50		35	

$F_{.90}(1,4) = 4.54$; $F_{.95}(1,4) = 7.71$; $F_{.99}(1,4) = 21.20$

* $\frac{P}{P} < .10$
 ** $\frac{P}{P} < .05$
 *** $\frac{P}{P} < .01$

DISCUSSION AND CONCLUSIONS

The results of the data analysis generally did not support the hypotheses of this experiment. Before theoretical assumptions are called into question, a number of methodological problems must be resolved. One problem that needs more attention is improving the quality of the judging. The judges in this project operated under a considerable handicap by having to rate the audiotapes without the benefit of a typescript. The quality of the tapes was not always good due to excessive background noise and only moderate fidelity voice reproduction. This led to a certain amount of idiosyncratic "projective" judging of the tapes that was probably unavoidable under the circumstances. Producing recordings of better quality and providing transcripts would reduce that significantly. The use of judges with greater experience in interpersonal diagnosis and more training with the specific scales involved would probably result in greater unanimity among judges and greater validity of their ratings. Although the problem of the validity of the ratings is not easily solved, using sophisticated judges with considerable experience in psychotherapy and interpersonal diagnosis seems to be a reasonable way to assure the validity as well as the reliability of the ratings.

Another problem, suggested by the results of the LIES analysis, is maintaining quality control over the operationalized independent variables. Although the judges could differentiate between the two types of leaders,

the differentiation was apparently based on behavior that was, for the most part, irrelevant or peripheral to the defining features of activity and passivity. The passive leaders frequently failed to intervene when such an intervention would have facilitated the group's progress. They tended to interpret their role to mean being quiet, soft spoken, inactive leaders as opposed to being active, assertive leaders. Thus, instead of comparing member-leader interaction-oriented leaders with group process-oriented leaders, relatively active leaders were apparently compared with relatively inactive leaders. The LIBS showed that passive leaders participated in the groups less frequently as leaders than the active leaders in that they intervened less and used more support-seeking behavior. The former may have been appropriate at times, and indeed was anticipated as a general difference, but the latter is questionable. Submissive-Affiliative behavior is generally member-appropriate behavior, related to assuming a member role in the group (as it was in most instances recorded in this study).

One of the fundamental assumptions of the interpersonal theory of behavior is that behavior results in counter-behavior (Mueller, 1969a). If the leaders do not behave differently, then the members of their groups would not be expected to respond differently. The differences that did emerge may be related to the finding that participation in groups may increase a participant's need for dependency, particularly if the leader is inactive (as opposed to active or passive).

Better control over the leaders' behavior could be obtained by one or a combination of these methods: better training of the group leaders, including more effective role-induction techniques; using experienced

leaders who already fit the criteria for the role models being studied, rather than attempting to train leaders to assume roles; closer (optimally, session-by-session) monitoring of each leader's behavior to provide him with immediate feedback on his performance; using a test that could predict the type of leader an individual is likely to be as a selecting and screening device. In view of the behavioral portraits Segal (1970) has been able to draw using the A-B Scale, that might be an appropriate predictor. Wile, Bron, and Pollack (1970) have developed a test to detect the orientations of potential groups therapy leaders that might also be appropriate.

Another methodological problem is the length of the group.

Although many groups do not last as long as six sessions, a number of the predicted differences may need additional time to become apparent. Without a clear measure of where a group is in terms of the process of group development, it would be questionable to assume that groups being compared are at the same stage, or that any given group is at the stage at which it is presumed to be, as McGrath and Altman (1966) pointed out. Also, weekly variations in attendance, which no doubt diluted the effects of the groups and slowed their progress,* would have less influence on the process and outcome if the groups met longer. A great effort should be made to assure regular attendance by everyone. Unfortunately this is not always feasible in an academic setting.

A problem related to the length of the group is the problem of

* The Kent State student-National Guard confrontation and consequent student strike occurred near the end of the groups and disrupted at least one session of every group directly, and indirectly, by leading to a rescheduling of midterm examinations.

when outcome should be measured. Ideally, a post-group evaluation should be made shortly after the end of the group and at several intervals thereafter. There are no guidelines as to how these intervals should be spaced or how many would be useful. The example of Karson and Wiedershine (1961) is instructive. They administered the 16 PF to members of analytically oriented psychotherapy groups. In a group started six months prior to testing, no change was measured; in a group that had been in progress for 18 months, significant changes were found after another six months of therapy.

The analysis of interpersonal themes has shown promise as a research strategy, and the Interpersonal Theme Analysis Technique as well as its variant, the Leader Interpersonal Behavior Scale, have been useful tools in analyzing and comparing group processes. Further work is needed to improve them as research instruments. Judges in this study encountered some of the same problems Terrill and Terrill (1965) reported in their study, suggesting that there may be particular deficiencies in the scoring system that need correction. Improving the scoring manual and clarifying the definitions of certain themes (particularly in the Dominant hemisphere) would go a long way toward correcting those deficiencies.

The results obtained have some implications for further research in this area. The effects of inactive leaders resemble those reported by Seligman and Sterne (1969), Salzberg (1967), and others for leaderless groups. If the resemblance is more than superficial, then a similar analysis of the outcome of such groups may show detrimental changes in participants. The EPPS Dependency Scale should receive more attention as a potential outcome measure since it is convenient, relevant, and is

apparently one of the few psychometric measures that has shown sensitivity to the effects of therapy, particularly group therapy (e.g., see Anker & Walsh, 1961; Coffey, Freedman, Leary, & Ossorio, 1950; Pattison, 1965).

Although this has not been a fair test of the contention of Rogers (1942) and others that therapist activity promotes dependency while non-directivity decreases dependency, the results suggest that therapist activity per se does not increase dependency; it is the quality of the activity that could potentially do so. Thus it is not contradictory to advocate therapist activity to reduce member dependency. However, this activity should be aimed at increasing members' awareness of their behavior and reducing the need for dependency (through interaction with group members or -- perhaps -- focusing attention on the group process) rather than fostering it.

The analysis of the outcome by high and low initial dependency indicated that there may be some value in considering the need-structure of potential members when organizing groups. This suggestion is only tentative. The effect needs more conclusive replication.

A final conclusion is in regard to the need for replications. While comparative studies using two groups represent a vast improvement over $N = 1$ studies, the adoption of the $N = 2$ design as the standard in group research will lead to endless controversies in the literature based on contradictory findings. The differences observed in this study among leaders and their groups suggest that only by surmounting the difficulties of large scale investigations will group researchers discover reliable methods by which groups can be made more effective and increase our understanding of group processes.

SUMMARY

The purpose of this study was to investigate the relation between two contrasting styles of encounter or therapy group leadership, labeled active and passive, and group process and outcome. Particular attention has been given to dependency as a process and outcome variable. From a review of the literature it was concluded that different styles of conducting groups are expected to -- and do -- affect group process and outcome. These differences have not been systematically explored and general agreement on their effects and their desirability is lacking.

Active leadership has been defined here as a style of intervention in which the leader initiates and is involved in interactions with the members of the group. The active leader plays an important role in structuring and defining the group by setting rules for interaction, setting contingencies on member behavior, providing behavioral models for the members, and generally "setting the stage" for productive group process. Active leaders attempt to deal with dependency when it arises as an individual problem rather than as a group phenomenon on the assumption that intentionally magnifying the problem is of dubious value (Fagan, 1970) and takes away from the work of the group: interpersonal growth (Egan, 1970).

Passive leadership has been defined as a style of interaction in which the leader attempts to minimize his role in structuring and defining the group and maximize the members' role in providing their own structure.

The passive leader is group process-oriented; his strategies are aimed at increasing members' awareness of the group process and maintaining the interaction within the group membership. Passive leaders promote the expression of dependency and authority conflicts on the assumption that by bringing them to the fore, they can best be dealt with and resolved.

The process research technique, known here as the Interpersonal Theme Analysis Technique (ITAT), and a modified version devised for this study, the Leader Interpersonal Behavior Scale (LIES), were used to study group leaders' interpersonal behavior and its effects on group members. Interpersonal Themes, the affective components of interpersonal behavior, were defined as those attempts of an individual to establish emotional states in his interactions that tend to elicit predictable responses from others (Mueller & Dilling, 1969). By their defining characteristics, active and passive leaders were assumed to differ in their interpersonal behavior. These differences should result in the elicitation of different reciprocal behaviors from their respective group members. Specific differences were suggested.

Members of passively led groups, particularly short-term groups, are expected to show more signs of self-support and less need for dependency and environmental support following their groups than members of actively led groups. Self-support has been defined as doing for oneself instead of manipulating and emotionally blackmailing others into doing it (Perls, 1970).

Changes in the need patterns of group members were studied through the use of the Edwards Personal Preference Schedule (EPPS). Dependency was operationally defined as the algebraic sum of the EPPS Deference and

Succorance Scale scores less the Autonomy Scale score, following the suggestion of Heller and Goldstein (1961). Several EPPS scales were also used as indicators of need for environmental and self-support.

Ten encounter groups, each consisting initially of 12 members and a leader, were organized. The participants were single male and female undergraduates who had expressed interest in being in an encounter group and met these additional criteria: willingness to participate in the research aspects of the project, not concurrently in therapy, and not previously in more than one encounter group. No experimental credit was involved. An equal number of males and females were initially assigned to each group. The groups met for six weekly sessions that typically lasted from two to two-and-one-half hours. The six groups that had maintained the most regular and stable membership (average $n = 8$) were included in the data analysis. The total sample ($N = 50$) consisted of 28 males and 22 females.

The group leaders were second and third year male doctoral students in clinical or counseling psychology who would be best described as relatively inexperienced group leaders, although their level of experience is probably typical of the graduate student "therapists" used in psychotherapy research. Leaders were designated as active or passive on the basis of their stylistic preferences and amount of previous experience so that both groups were approximately matched for level of experience.

The process analysis was based on 30-minute samples from the tapes of an early and late session (the second and fifth). A tape, consisting of six minutes of leader interventions, was composed and analyzed using the LIRS. The sampling procedures employed were felt to adequately

represent the total group process. Miller and Maley (1969) were cited as establishing the representative nature of consecutive time samples.

The tapes were rated by three judges as to which category the groups' interpersonal themes fell into. Scoring was based on agreement by two of the three judges. The judges also ranked the leader tape samples on activity-passivity.

The average agreement of any two judges on the ITAT was 91.5% and 69.7% on the LIBS, which was felt to represent high and moderate agreement respectively. There was complete agreement on which judges were active and which were passive. Comments by the judges suggested that their rankings were based in large measure on differences in voice qualities (volume and forcefulness) and frequency of verbal interventions rather than on differences in some of the formal defining qualities of active and passive leadership.

Active leaders were found to have intervened more frequently than passive leaders -- almost 80% more over all tapes sampled. The relative frequencies of types of intervention were almost identical for both types of leaders with the exception of support-seeking behavior, which the passive leaders were judged to have used five times more frequently than active leaders. All leaders used Teaching themes more than Supporting themes, which was not predicted for passive leaders. Both groups used more Distancing than Punishing themes, which was not predicted for active leaders.

No significant differences ($p \leq .05$) were found when comparing active and passive conditions in the early and late sessions using the ITAT.

Pre-treatment differences on the EPPS scales were negligible, with the exception of Exhibition, on which individuals in the passive condition tended to score higher ($p < .05$), and Aggression, on which individuals in the active condition tended to score higher ($p < .10$). To control for this as well as other sample variations, difference scores were used in analyzing post-treatment changes.

Few changes in need structure were found immediately following the encounter groups. The actively led groups showed a decrease in Dependency Scale scores and the passively led groups showed a slight increase. This difference, significant beyond the .05 level, was contrary to expectation. Autonomy and Succorance, components of the Dependency Scale, showed changes favoring the active condition ($p < .10$ and $p < .01$ respectively), also contrary to expectation.

A stepwise discriminant function analysis of EPPS post-test scores showed that the groups could no longer be differentiated on Exhibition, but could be on the basis of Succorance ($p < .10$), Aggression ($p < .10$, as before), and Dependency ($p < .01$), the best post-encounter group discriminant.

No significant pre-group differences based on sex of participants were found. Dependency was the only post-group variable that significantly differentiated the participants when grouped by sex ($p < .05$). The greatest change in Dependency score was among males in the active condition, whose mean T score dropped from 45 to 34.

When difference scores were analyzed according to level of dependency (High-Low), high dependency participants showed a decrease in Dependency scores no matter which condition they were in (active or

passive), and low dependency participants showed an overall decrease in the active condition and increase in the passive condition ($p < .10$). Low dependency participants apparently showed more constructive change when in actively led groups, giving some support to the hypothesis that leadership style has a differential effect on participants according to their level of dependency.

Although the data analysis generally did not support the hypotheses of this experiment, several methodological problems must be resolved before the theoretical assumptions are called into question. The reliability and validity of the judging need to be increased. Several methods were suggested to do this. Stricter quality control needs to be maintained over the operationalized independent variables. Methods for assuring that leaders fulfill their roles well were suggested. It was also suggested that greater efforts be made to stabilize weekly attendance and take level of group development into consideration. Longer groups were recommended when feasible. It was recommended that repeated outcome measures be made when feasible.

The research potential of the Interpersonal Theme Analysis Technique and its variant, the Leader Interpersonal Behavior Scale, was reaffirmed. Suggestions were made to improve them as research instruments. The value of the EPPS Dependency Scale as a convenient, relevant, and apparently sensitive outcome measure was also noted. The need for further research comparing more than two groups at a time was noted. Large-scale investigations are needed to discover reliable methods by which groups can be made more effective.

Although this study did not yield a satisfactory test of the hypothesis that therapist activity promotes dependency and non-directivity decreases dependency, the results suggest that therapist activity per se does not increase dependency; it is the nature and quality of the activity that matters.

APPENDICES

APPENDIX 1

DESCRIPTION OF ENCOUNTER GROUPS AND MEMBER'S
CONTRACT CIRCULATED TO SOLICIT VOLUNTEERS

Encounter Group Research Project

ANNOUNCEMENT

ENCOUNTER GROUPS FORMING FOR SPRING QUARTER

The purposes of encounter groups are: to allow individuals to meet other individuals as well as themselves in ways that are not usually possible in social situations, to increase personal and interpersonal sensitivity, and to assist the participants in the discovery of their own personal, academic, and social goals.

Between eight and 12 encounter groups will be run during the Spring 1970 Quarter by qualified graduate students in clinical and counseling psychology. All the group leaders will have had previous experience in group work. Each group will consist of an approximately equal number of students of both sexes.

The groups will meet weekly during the quarter for a two-hour session, at times and places to be arranged.

There will not be a fee for participating in a group.

Students who are interested in applying should meet the following qualifications:

1. Potential participants must not have previously been in more than one encounter group (of any type) or therapy group.
2. Since one of the purposes of the project is to evaluate encounter group experiences, participants are asked to agree to the use of several data-gathering procedures (e.g., a pre- and post-group questionnaire). You will be identified only by your first name and only authorized project workers will have access to this confidential data.
3. Participants should understand that an encounter group is not a substitute for therapy. If you feel you need counseling or therapy, please speak to someone at the Counseling Center (311 Lit.) or the Student Mental Health Service (350 Inf.).
4. If you are in therapy, you must have the consent of your therapist to participate in an encounter group.
5. Participants should understand the importance of attending as many group sessions as possible for their own benefit as well as for the EGRP's and should not volunteer if they expect their attendance to be irregular.

APPENDIX 2

ENCOUNTER GROUP RESEARCH PROJECT:
LEADER'S NOTES

1. Data Gathering and Confidentiality

Ideally, data gathering should not interfere with the group process or leader-member relations. Whether or not this is the case depends on how intrusive the measuring procedures are and the leader's attitudes toward it. In areas of uncertainty for the group members, the attitudes of the leader, conveyed non-verbally as well as verbally, provide the members with a model to emulate, an example of certainty and confidence. Therefore, it is important that the leader not feel conflicted about the research or ethical aspects of the project.

All group participants (Ss) have agreed to fill out the pre- and post-group measures and allow the sessions to be taped as a condition for being in one of the groups. We ask participants to engage in this fair exchange of services with us which should not cause a leader to feel embarrassed in any way. Research such as this (which could not be conducted ethically without such an agreement) increases our understanding of group processes and helps us make groups more effective.

One of the reasons successful groups occur is that the group members perceive the group setting as being a safe, private place. This is promoted by committing everyone to the ethic of "discreet silence" about the group proceedings. Most everyone will want to discuss what has happened to them in the group, particularly if it was a significant encounter. I always begin a group by asking the participants not to gossip about other members of the group and not to mention anyone by name outside the group without that person's permission. I acknowledge that to expect secrecy is unrealistic but that they should use discretion in discussing the group. I ask that anyone who feels unable to do this should leave and that anyone who has any doubts about the ability of others to do this should discuss this with the group. Dealing with this frankly and seriously means that it probably will not become a problem and also sets the tone for the group. This is doubly important when research is involved.

The data-gathering consists of the EPPS and tape-recording. The first EPPS should be handed out at the first session and is due back by the second session. Remind people by phone to return it on time. Ask Ss to take the EPPS honestly, for themselves, without trying to meet anyone's expectations of "correct responses." There are none. All sessions should be recorded. The second EPPS will be handed out at the last session and collected later. Ask Ss to use pencil and return booklet and answer sheet. To assume confidentiality, every leader should assign a number to every participant. Keep a record of this number. I

will eventually add some prefix to it so that every participant will have a unique number. Although a record will be kept of names and numbers for communication purposes, each participant (and group leader) will be identified only by number for research purposes. This number should appear on the EPPS protocols -- no names. During the group sessions, individuals should be introduced and referred to only by first names. At any time, if group members start to refer to persons and incidents outside of the group, they should be asked to deal with the issue in the here-and-now of the group situation. One of several alternate strategies will be used to make sure that the judges are not familiar with anyone whose voice they hear on the tapes. Group members can make this job easier by following the above-mentioned suggestions.

As far as feedback on the testing is concerned, I am in favor of sharing information with Ss but feel that this must be left to the discretion of the group leader. If you feel you will have the time and desire to explain the scores to your group members, I will give this information to you when it is available.

A last research problem that needs mentioning here is the use of tape recorders. We are personally responsible for them so use caution in all your relations with the machine. Make sure you are recording at 1 7/8 inches/second and on the correct track. You will be given recording tape designed to hold four two-hour sessions, one on each track. Use the enclosed index card to note the date, session number, track number, and group leader for each recording. Record this information at the start of every track. When starting a track, leave enough unused tape so that the tape won't slip off if rewound. Wind it to 5, then reset counter to 0. DO NOT REWIND TAPE. Make sure the microphone is properly plugged in, the monitor switch is on "speaker off," the playback volume is at "0," the tone and volume level are properly adjusted and the record button is depressed. (When volume is "automatic," the volume meter does not operate.) If you fail to do any of these, the session will be lost to the project, so please allow yourself time to adjust the machine before the group starts. Find a place for the microphone that allows it to pick up everyone's voice clearly with a minimum of background noise and rumbling.

Start the machine when the group is scheduled to begin and let it run until the session ends, even if it goes a little over two hours. Do not encourage sessions that last longer than that, but use your judgment as to whether something should be completed during a given session or can be carried over to the next. If new material is presented during the last 15 minutes, you will probably run over. Use this time to allow everyone to get their "last licks" in. If a session does not seem to have enough momentum to sustain itself for two hours, you might ask the group if they want to end early. No session should last less than an hour, though.

I must return the recorders each morning or I'll be turned into a pumpkin, so please make sure arrangements have been made to pick up the recorder.

2. Leadership Style: Type 1

The first thing that all leaders should do is take care of the administrative matters (explain confidentiality, data-gathering) described above. After that has been taken care of, the first session begins. (The TR goes on now.) Type 1 (Active) leaders should have reviewed the "Definitions" handout before coming to the group. The following information is meant to amplify the material discussed during the training group and in the earlier handout. You might begin by explaining to your group that your role is to facilitate interactions among group members and that the responsibility for what happens rests with the members themselves. Explain some of the basic rules that you want them to operate within:

1. Stay in the here-and-now.
2. No gossiping.
3. Always talk to someone, not about them as if they were invisible. Don't talk "in general," talk in specifics to someone or everyone. Make personal statements only (1st person pronouns).
4. Don't attempt to speak for others or tell them what they really think.
5. If you don't want to answer anything, say so. You may be asked what your objection is, but you don't have to answer the question or state your objection if you don't want to.
6. Questions should be honest questions, not statements in disguise.
7. Try to deal with issues on a feeling instead of intellectual level.
8. "You should" statements as moral prescriptions should be rephrased as "I want you to" statements.
9. Confidentiality: don't discuss group business outside of group -- especially with group members -- while the group is still meeting. Use discretion later. "Discreet Silence."

Obviously they will not abide by all of these rules immediately, but by stating them at the start, you will be perceived as structuring the group. Remind members when they are violating specific rules. After the rules have been explained, "Make the rounds." That is, start by asking each individual to tell the group "where he is" and what he's feeling here and now. (Whenever it's not clear what's going on in the group (e.g., prolonged silence), this is a useful technique to employ.) You might want to go around once before asking anyone to elaborate or you might want to encourage someone to elaborate as he brings out something of interest. Group participation can be encouraged by asking, "How does the group feel about that?" or some such question.

I'd like to introduce a distinction not made heretofor, namely the difference between the leader as leader and the leader as member. In "Definitions," I described the active leader, emphasizing his role in structuring and guiding the group toward successful encounter. Although the Type 1 leader is expected to be warm, empathetic, self-congruent and genuine (etc.), he is not a member of the group in the same way that the SS are. These growth-enhancing qualities should be apparent in what is said and done, but the leader will not seek to draw attention to his person -- get in the "hot seat" -- as members will. Although he may

share his feelings when the group "makes the rounds," he may not if that seems inappropriate. In other words, Type 1 leaders will participate actively as leaders but passively as members. Group members should be able to remember your personal qualities without knowing a lot of the content of your personal life. It is possible, for example, to identify with a member's difficulty ("I know how frustrating that can be") without getting deeply involved in your difficulty. Should it happen that you have an insight or somehow grow during a group experience, this certainly can be shared with the group members, but you should not try to consciously deal with a hang-up of yours in the group. That is the purpose of the training group.

		Leader (empathic with low Role self-disclosure)	
		A	P
Member Role (empathic with high self- disclosure)	A	AL/AM	PL/AM
	P	AL/PM	PL/PM

The figure above shows four possible combinations of leader and member roles. We are using the two lower cells in this phase of the ERGP. Member role is being held constant and Leader role is being studied.

Being active does not mean always being in the spot light or being a part of every (or even most) interactions. Everyone must do their own growing. The leader tries to promote growth situations and help remove stumbling blocks to growth (e.g., correct projections, mis-perceptions, focus on feelings). When an individual would, in your estimation, benefit by your intervention in his effort to work through an impasse, then enter the process but remember that you can only help someone do his own work; you cannot do it for him. Sometimes, the best thing a leader can do is stand aside, ready to assist, but in the background.

3. Leadership Style: Type 11

Type 11 (Passive) leaders should familiarize themselves with the "Definitions" flyer and handle administrative matters in a way that is not likely to conflict with their leadership role. This may be difficult, but please try to do this. It may help to change posture or tone or something to indicate that what you are doing as administrator is different from your role as leader. You might refer to yourself as a "facilitator" or "enabler" rather than leader. After the administrative duties are taken care of, start the tape recorder and say something like this:

Encounter groups allow individuals to relate to themselves and others in ways that are not always possible or easy in normal social situations. What happens here depends on what you want to happen. So why don't we begin.

The leader then lapses into silence and lets the group start developing. The leader should resist attempts to get him to structure the group. Possibly you could reflect the intent of such behavior ("You'd like me to tell you what to say." "Would you like to talk about your anxiety?") or ask "How do you feel now?" Verbal interventions should be infrequent and brief. If you find yourself talking as much as the average member, you are probably saying too much. How much the group will push you to activate them will depend in large part on how verbal they are. If the silence lasts more than 10 minutes and the group seems to be having trouble getting off the ground, you might wonder out loud about what the difficulty in talking is or what seems to be happening. (The same can be done for groups that chit-chat instead of really dialogue.) The latter is a question the Type 11 leader will use as one of his more frequent types of interventions, since it asks the membership to look at themselves and each other and verbalize what is happening, what they are doing, or avoiding (a frequent problem), or trying to do. After these process questions are posed, the leader can usually draw back and let the group handle them.

The same ground rules apply for Type 11 groups. However, the rules are introduced slowly. The rule of confidentiality and discreet silence is probably the only rule that needs to be clear from the start. Bring up additional rules as they seem appropriate. That is, when someone seems to be violating a rule, ask him if he would do whatever you'd like to encourage; e.g., "could I ask you to speak in the first person" or "in the here and now." Try to get the groups to discover the rules themselves before you try as direct an approach as that. For example, when someone has the habit of speaking for everyone or in generalities ("It's a known fact," "People say," "Everybody thinks that"), you might interrupt and ask the group how they feel about being spoken for, or included in such a statement. If you don't feel that it would be productive to wait for the group to become aware of your purpose, ask an individual to consider your suggestion (as the earlier example). Type 11 leaders generally will not address suggestions to the group; they will ask an individual to do something.

4. Clinical Judgement and Some Limits

The major responsibility of all leaders is to see that a growth enhancing environment is provided and that no harm is done to anyone. There is always a risk that someone does not have the self-support (in this case, ego defenses) to handle a given encounter or the encounter process itself. It is one of the functions of the leader to use his

judgement and intuition to estimate how safe everyone is. When it seems apparent that someone needs additional environmental support in a given situation, it is your responsibility to provide it. Sometimes this means assuming a protective attitude toward someone who is being attacked. Sometimes a member needs to be taken off the hot seat. Ask him if he wants to get off and in those situations where you feel that it would be unwise to risk continuing, tell the group that you think it would be best to let the matter drop. You may want to ask someone to leave for a few minutes or longer. You may want the whole group to take a short break.

Occasionally, someone gets upset during or after a group. Try to anticipate who this might be so that you are not caught unaware. At some point, perhaps after a very intense session, let it be known that you are available to talk to anyone who feels they would like to discuss any uncomfortable feelings that they might have. (This is to be used to deal with personal anxiety and should not be used to continue the group or develop cliques.) Saying this diplomatically is very important, since you will be dealing with a very delicate matter. You can refer them to me if you feel this would be advisable. Most people can wait until the next day to be seen. Determine if this is the case. If a crisis seems to be developing, you can take or send the person (preferably with an escort) to the Infirmary for medication, crisis therapy, or admission. If anyone becomes anxious enough to need crisis therapy or admission, please call me. You can suggest a person leave the group. You can suggest (and arrange) counseling for anyone.

While there is no real growth without some growing pains (suffering, anxiety, depression, confusion, etc.), we know better than most group members what they may be getting into and unless we want to take some of the responsibility for turning a "normal neurotic" into a "patient," we must set some limits on what can occur in our groups. Some additional limits are: no using alcoholic beverages or drugs during groups, although talking about them is O.K. No sexual contact, although touching is O.K. (Just watch those hands.) These shouldn't need to be mentioned unless they specifically come up.

Odds and Ends, After-Thoughts

I have a limited number of EPPS booklets, so I must have them back to distribute to other groups (and return to their rightful owners) as soon as possible. Ask participants to fill it in and bring or send it to me at the Counseling Center, 311 LITTLE within a few days or return it to you by the second session at the latest.

Please keep the reel of tape and empty take-up reel in a safe place -- away from children, heat, and magnetism. I'll supply you with a tape recorder and adapter plug for every session. Make sure you keep an accurate record of which tape track you record each session on.

New Information Policy -- all participants will be given a departmental feedback form on which they can voice general satisfaction or dissatisfaction with our activities. They can also request more feedback at that time. If anyone asks, tell them arrangements will be made for feedback to those interested when the project has ended. I'll work out the logistics later.

GOOD LUCK!

[NOTE. -- The "General Definition" section of the following process scales were also included:
A Tentative Scale for the Measurement of
Accurate Empathy, A Tentative Scale for the
Measurement of Nonpossessive Warmth, A
Tentative Scale for the Measurement of
Therapist Genuineness or Self-Congruence
(Carkhuff & Truax, 1967).]

APPENDIX 3

DEFINITIONS OF ACTIVE AND PASSIVE
GIVEN TO GROUP LEADERS AND TAPE ANALYSTS

DEFINITIONS

Two terms that need defining are active and passive, neither of which has a standard, accepted meaning in therapy. Both terms are being defined here relative to each other and to the behavior of a hypothetical average group member. Active means causing or initiating movement or activity. It implies involvement in activity. An active leader is one who by his behavior initiates and directs the course of group interactions and is involved in the interactions. The active leader plays an important role in structuring and defining the group by setting rules for interaction, initiating and entering into interaction with the group members, and by providing one or more behavioral models for the group members. The active leader is directive in the sense that he makes suggestions and "sets the stage" so that the group process will be productive. Reflective statements by the leader will not be considered indicators of high leader activity since they generally serve to maintain the interaction within the group membership rather than involve the leader in structuring and entering the ongoing process.

Passive means not acting, not engaging in open action. A passive leader is one who attempts to direct only minimally the course of group interactions and whose involvement in the interactions is usually not characterized by overt action. The passive leader tries to minimize his role in structuring and defining the group, and in interacting with group members. He provides few behavioral models for the group members. In

fact, his role is largely in contradistinction to the role the typical group members are expected to assume. Reflective statements, questions (e.g., "How do you feel about that?"), and quiet reinforcement will be typical of passive leadership since the passive leader aims to maintain the interaction within the group membership.

The group leader's approach to encounter is grounded in his personal development -- i.e., in terms of the qualities that have been found to be common to effective therapists (Rogers, 1961) -- as well as in his development in terms of his particular theoretical position. Leaders will be expected to demonstrate their positive therapeutic qualities within the context of their style and technique of leadership.

There is some risk in assigning leaders blanket labels like active or passive since consistency in style is not always attainable or desirable. Active leaders will on occasion behave passively and vice versa. However, I do not at this time want to analyze the group process in terms of what follows specific units of active or passive behavior; I want to examine the overall effects of these styles. Though I recognize a difference between units of leadership behavior and style of leadership, I will designate a leader as de facto active or passive according to the overall impression his behavior makes -- in terms of the relative balance of active and passive behavior over the course of the group.

Nothing here should be taken to imply that either style of leadership is at all times appropriate or of higher value than the other.

APPENDIX 4

ENCOUNTER GROUP RESEARCH PROJECT:

Scoring Manual for the Interpersonal Theme Analysis Technique

Note. -- This scoring manual was adapted from the one assembled by James Crowder (1970). The information contained herein was originally published by Freedman et al. (1951).

General Considerations

The interpersonal circumplex consists of 16 reflexes (categories) of interpersonal behavior, into which all interpersonal behaviors may be rated. It is divided into quadrants by orthogonal axes. The horizontal axis covers the dimension of dominance-submission, while the vertical axis represents the affiliative-disaffiliative (or love-hate) dimension.

In rating behaviors into categories, the behaviors are first judged in terms of the axes, and thus the behaviors are placed into quadrants of the circumplex. Then, a behavior is judged into a specific category within the quadrant by matching it with the descriptive terms of those categories. Statements sometimes include behaviors of more than one category, in which case multiple scorings should be used.

Problems arise because [1] the categories are not mutually exclusive, [2] the meaning of behaviors is determined partly by the context in which they occur, [3] affect and content (i.e., words) are sometimes incongruent, and [4] raters may use different levels of interpretation. These problems are demonstrated below by the use of a few examples.

Consider the client statement: "I like you." If this statement were genuine, it would be rated "M." If it were said sarcastically, it would be rated "D." If it came after an interpretation which the client did not want to deal with, it would be rated "F."

For another example, consider the following client statement: "You look tired today." If this statement connoted genuine sympathy,

it would be rated "N." If it came out of the client's guilt for seeking help from the therapist, it is possible to argue that it should be rated "H," but this rating would require deeper interpretation than the sympathetic "N."

The client statement, "I don't trust you," implies distrust "G" and rejection "C." It is necessary to choose one or the other in this rating system.

In rating the client and therapist behaviors, the following priorities are listed so that the above problem will be minimized:

[1] Context takes precedence over affect; [2] affect takes precedence over content; and [3] interpretation does not go beyond the immediate context.

Three types of reported client-to-other behavior are scored.

These are [1] client's reports of actual interaction with others, [2] client's fantasized interaction with others (includes wishes, desires, should-haves, and fears), and [3] client's feelings about others as reflected in his statements about them. The following examples illustrate these categories:

[1] C: "My parents told me that I shouldn't get serious about any girls while I'm here. I told them to stay out of my affairs."

[2] C: "I wish I had some close friends."

C: "I'm afraid that people will reject me."

C: "I should have told her off."

[3] C: "I distrust my parents."

C: "They are selfish people."

Below, examples of behavior for each category are listed, and, where deemed helpful, explanatory statements are included. It is impossible to provide examples for some of the meanings of some reflexes, because the meanings are sometimes very dependent on the tone of voice, e.g., sarcastic behavior (reflex "D").

Categories of Interpersonal Behavior

Aim: To reproduce accurately the emotional state the actor is attempting to establish; to identify the theme of the actor's interpersonal behavior. Empathize with the individual whose behavior is being rated from the position of the object or objects of the activity.

- Priorities:
1. Context takes precedence over affect
 2. Affect takes precedence over content
 3. Interpretation does not go beyond the immediate context

Quadrant EGDE (Dominant-Disaffiliative; Competitive-Hostile):

- B. Boasting, Self-Stimulating, Narcissistic, Intellectualizing (p.3)
- C. Rejecting, Withholding, Competing, Accusing, Arguing (p.4)
- D. Punishing, Being Sarcastic, Threatening (p.6)
- E. Hating, Attacking, Disaffiliating (p.6)

Quadrant FGHI (Submissive-Disaffiliative; Passive-Resistant)

- F. Complaining, Rebelling, Nagging, Sulking, Passively Resisting or Aggressing (p.7)
- G. Distrusting, Suspecting, Being Skeptical (or Showing Incomplete Acceptance) (p.8)
- H. Condemning Self, Withdrawing (p.9)
- I. Submitting, Deferring, Obeying (p.10)

Quadrant JKIM (Submissive-Affiliative; Support-Seeking)

- J. Admiring, Praising, Asking Opinion (p.10)
- K. Trusting, Depending, Asking for Help, Being Dependent (p.10)
- L. Cooperating, Agreeing, Confiding, Collaborating (p.11)
- M. Loving, Affiliating, Identifying With (p.12)

Quadrant NOPA (Dominant-Affiliative; Supportive-Interpretive)

- N. Supporting, Sympathizing, Reflecting Feelings, Reassuring, Generalizing Conscious Feelings, Approve, Nurture, Therapeutic Probing (p.12)
- O. Giving Help, Interpreting Beyond Conscious Feelings, Offering Assistance (p.14)
- P. Teaching, Advising, Giving Opinion, Informing, Acting as an Authority on Things (p.14)
- A. Dominating, Directing, Commanding, Information-Gathering, Diagnostic Probing, Behaving Independently, Being Bossy (Giving Unsolicited Orders or Advice) (p.16)

		DOMINANT			
		B. Boast	I	A. Dominate	
		C. Reject		P. Teach	
		D. Punish		O. Give	
E. Hate		I	IV	N. Support	
DISAFFILIATIVE					AFFILIATIVE
F. Complain		II	III	M. Love	
		G. Distrust		L. Cooperate	
		H. Condemn Self		K. Trust	
		I. Submit		J. Admire	
		SUBMISSIVE			

Examples of Behavior for Each Category

Reflex "B" (Boasting, Self-Stimulating, Narcissistic, Intellectualizing Behavior)

Therapist and client "B."

1. Therapist or client is boastful. Examples:

C: "I made the highest score on the final examination."

C: "Looks like I really helped you."

2. Wandering, free-associating, conversation in which the speaker provides his own stimulation. This category usually applies more to the client than the therapist. Examples would include client statements in which a "list" of activities since the previous session is covered without emotion, and without a previous therapist eliciting question. This is generally a long, rambling statement, which may have been started by a therapist question, but which continued with the client providing his own stimulation. In this case, the client's statement would be rated in two parts, the answer to the therapist's question would be rated an "L," and the rest of the client's statement a "B."
3. Therapist or client intellectualizes.

Therapist example:

C: "I really feel affectionate toward you."

"L" vs. "B"

T: "That's because you once had that feeling toward your father."

Client example:

T: "What is it that's troubling you?"

C: "I haven't worked out my Oedipus complex."

Client-to-other "B."

1. Client reports boasting to others.

C: "I told him how wonderful I am."

2. Client reports having been narcissistic with others.

C: "I took advantage of her."

Reflex "C" (Rejecting, Withholding, Competing, Accusing)

Therapist and client "C."

1. Client or therapist rejects previous statement (regardless of whether previous statement was true). Examples:

C: "No, that isn't right. What bothers me is that no one seems to really care for me." In this example, the "No, that isn't right" would be rated "C." The second part would be rated "P" if no strong emotions were attached to it. Of course, if the client expressed feelings of hurt or sadness, the second part may be rated "K." A "no" statement following a therapist question with no point of view attached (i.e., where therapist does not make a positive statement that is subsequently rejected) should be rated "L" instead of "C."

2. Client and therapist are arguing, competing, usually with

an undercurrent of hostility. Examples:

"C" vs. "P"

T: "You can find people like that in New York."

C: "I've looked and there are no people like that here."

T: "You haven't looked in the right places. You've met only a few people here."

C: "I know I can't find people like that here. I need to go somewhere else."

The first therapist statement in this interchange may not be rated a "C," depending on the previous client statement that elicited it. For instance, if the previous client statement had been "I need to find some people that I could trust," the first therapist statement above might be rated "P."

3. Client or therapist refused a previous suggestion, directive, etc.

T: "I will not see you twice a week."

C: "No matter what you say, I won't stay here."

Client-to-other "C."

1. Client reports rejection of others.

C: "I don't like him."

2. Client reports competing with others.

C: "I tried to beat him at his own game."

Reflex "D" (Sarcastic, Threatening, Punishing Behavior)

Therapist and Client "D."

T: "If you don't get out of that relationship, I'll stop seeing you."

C: "People are going to keep bugging me until I kill myself."

Client-to-other "D."

C: "I told him that if he continued to harass me that I wouldn't see him anymore."

Reflex "E" (Hate, Attack, Disaffiliate)

Therapist and Client "E."

T: "Get out of my office."

C: "Go to hell."

T: "You're an idiot."

Client-to-other "E."

C: "She's nothing but a whore."

C: "I broke up with him."

C: "I hate my mother."

Reflex "F" (Complain, Rebel, Nag, Sulk, Passively Resist)

Therapist and Client "F."

1. Client passively resists therapist's interpretation put in the form of statement or question. Examples:

a.T: "Sounds like you get anxious around competent females."

C: "I don't know."

b.T: "Is it that your boyfriend reminds you of your father in some ways?"

"F," "A"

C: "I don't know. [Pause.] One thing that really disturbs me is that I can't concentrate when I study."

c.T: "Do I hear some resentment in there?"

no "F," "L"

C: "I don't know. [Pause.] You may be right. Yeah, I wasn't aware of it but I really do resent him for that."

Note: In example a, the client's "I don't know" is rated "F," because it indicates passive resistance to the therapist's statement. In these cases, the client is demonstrating an unwillingness to even consider the validity of the statement, but at the same time is not flatly rejecting it, either. In example b, the "I don't know" is followed by the change of subject. In this case, it is rather obvious that the change of subject is a defensive maneuver, seemingly unrelated to the therapist's question. The "I don't know" should be scored "F," and the change of subject should be scored "A." In example c, the "I don't know" was intended to indicate thoughtfulness, an attempt to deal with the therapist's question, which is validated by the rest of the client's statement. In this example, the "I don't know" is not scored, but the remainder of the statement should be enclosed in parentheses and scored "L."

2. Sometimes the therapists or client angrily withdraws (sulks), with some such comment as "I don't know."

These should be scored as "F."

Client-to-other "F."

C: "I resented his saying that, but I didn't say anything."

C: "When Dad yelled at me, I went to my room and didn't come out for hours."

Reflex "G" (Distrust, Suspect, Be Skeptical)

Therapist and client "G."

1. Therapist or client expresses skepticism at the previous statement of the other party. Examples:

"What?"

"What do you mean?"

"Maybe."

The first two examples should be scored "G" when the previous statement and its meaning was perfectly clear. The "maybe" expresses incomplete acceptance, or, better, neither rejection nor acceptance, but does express skepticism.

2. Therapist or client is suspicious of feelings, motives, etc., expressed by the other party. Examples:

C: "I don't think you really like me."

T: "Are you sure you're dealing with the thing that's really bugging you?"

"C" vs. "G"

Note: If the statement is an unconditional rejection or accusation (e.g., "You don't like me!"), it should be rated "C," not "G."

Client-to-other "G."

C: "I didn't believe her."

C: "Sometimes, it seems like no one can be trusted."

Reflex "H" (Condemn Self, Withdraw)

Therapist and client "H."

C: "I feel worthless."

T: "You wouldn't feel that way if I were a good therapist."

Client-to-other "H."

C: "I guess I should have confronted him, but I didn't
know what to say, so I left."

Reflex "I" (Submit, Defer, Obey)

Therapist and client "I."

1. Client or therapist submits more to avoid confrontation than to accept a statement because of its validity. This sometimes occurs after an argument, or to end an argument.
2. Client expresses extreme helplessness, inability to cope, without underlying belief that change is possible, that therapist will help.
3. "I guess so," and "yeah" responses, which are total responses, when the therapist is actually trying to elicit elaboration on something, or after therapist has made a statement about something.

Client-to-other "I."

C: "I didn't want to go to college, but Mom insisted."

C: "They take advantage of me."

Reflex "J" (Ask Opinion, Praise, Admire)

Therapist and client "J."

C: "What should I do?"

C: "You're the best therapist in the Counseling Center."

Client-to-other "J."

C: "I asked her what she would do if she were me."

C: "They're all so great -- intelligent and sensitive."

Reflex "K" (Ask for Help, Depend, Trust)

Therapist and client "K."

C: "This problem arose which I hope you will help me
with..."

Client-to-other "K."

C: "I trust her."

C: "I depend on them."

C: "I asked him to help me repair the car."

Reflex "L" (Cooperate, Confide, Collaborate, Agree)

Therapist and client "L."

1. Client cooperates with therapist, works on problems, answers questions, elaborates on reflective or interpretive statements. Examples:

T: "How old is your sister?"

C: "She's 18."

T: "It sounds like you have difficulty in accepting
positive feelings."

C: "Yeah, I think you're right. The other day, my
roommate said she liked me, and..."

Note: a. Sometimes it's difficult to discriminate
between elaboration and self-stimulating

"B" vs. "L" conversation. In general, self-stimulating
conversation is much longer, and less
affect-laden. Also, the focus of self-
stimulating conversation shifts frequently.

"I" vs. "L"

- b. When the client's agreement comes after an argument, is less sincere, and without elaboration to support it, "I" instead of "L" should be scored.

2. Client's "Yeah" statements which merely lubricate comments coming from the therapist. Examples:

T: "You remember last week when we were talking about sex?"

C: "Yeah."

T: "You got very angry with me."

C: "Yeah."

T: "Well, I was wondering why that made you mad."

Client-to-other "L."

C: "I went over and started a conversation with her."

C: "We told each other our problems."

Reflex "M" (Affiliate, Identify with, Love)

Therapist and client "M."

T: "I really like you."

C: "I feel close to you today."

Client-to-other "M."

C: "I dated him for two years."

C: "I care a lot about my Dad."

C: "We seem to have the same feelings about everything."

Reflex "N" (Support, Sympathize, Reflect Feelings, Reassure, Generalize Conscious Feelings, Approve, Nurture, Therapeutic Probe)

Therapist and client "N."

- C: "I'm sure you're intelligent, and capable of making it here." (Support, reassure)
- T: "Sounds like you're very lonely, and feeling incapable of establishing any real friendships." (Reflect feelings)
- T: "You said that your father really preferred your brother?" (Therapeutic probe)
- C: "Looks like you're very tired today." (Sympathize)
- C: "Well, I think you're doing a very good job."
(Support)

"N" vs. "A"

Note: The above therapist statements are rated "N" only if he is responding to data and feelings in the previous client statements. For instance, if the third therapist statement above had come after a client had said, "I had final exams yesterday," the therapist statement would be rated "A" (Directive). As a rule of thumb, reflecting feelings, therapeutic probes, generalize feelings, when rated "N" must come after a client statement which contained that data that is reflected, generalized, etc. Of course, support and reassurance, to be rated, does not suffer this limitation. The client statement above is rated "N" if it seems genuinely sympathetic; the fact that it may be prompted by guilt over receiving help is

irrelevant to the rating system.

- b. Reassurance occasionally turns into an argumentative, competitive exchange, in which the first therapist statement should be rated "N," but the following ones should be rated "C." Example:

T: "I know you can handle it." (Supportive)

C: "I know I can't!" (Angry)

T: "No, you don't want to, but I know that you can!"

Client-to-other "N."

C: "I told her that everything would turn out alright."

C: "I can understand her feelings about that."

Reflex "O" (Give Help, Interpret Beyond Conscious Feelings)

Therapist and client "O."

T: "If you feel up tight next week, we could meet twice."

T: "Your relationship with your boyfriend appears to be similar to the one you had with your father."

Client-to-other "O."

C: "Mom had her hands full, so I helped her with the dishes."

C: "I wish I could help him feel better about himself."

Reflex "P" (Advise, Teach, Give Opinion, Inform)

Therapist and client "P."

1. Therapist or client gives opinion, acts as authority on the state of things in the world. Examples:

T: "The way I see myself as being helpful to you is in trying to understand you, and, in the process, helping you to understand yourself."

T: "To get some information about your interests, you should take the Strong."

T: "You may have that feeling, but not be aware of it. It may be unconscious."

C: "In my experience, I've found that people in this society are like that."

C: "To make money farming, you have to do most of the work yourself. If you hire people to work for you, your expenses will be greater than your income."

Note: a. "P" is often scored after "C" in the same statement (example: "No, I don't really feel that way. The way I feel is..."). Of course, if rejection is not followed by explanation, "P" would not be scored. If the whole statement is a rejection of the previously stated point of view, with an argument as to why the speaker's point of view is correct, or just an assertion that he is right, the whole thing should be scored "C." "C"... "A" or "C"... "B" might also be scored (i.e., rejection

"C" & "P"

might be followed by a change of subject or self-stimulating conversation).

- b. Sometimes, statements of the way things are in the world is made to reassure, and should therefore be scored "N" instead of "P." Example:

C: "I really feel like I'm coming apart!"

T: "When people begin to change, they often feel like they're disintegrating. That seems to be what's happening to you."

Client-to-other "P."

C: "I taught him how to water ski."

C: "When he asked for my advice, I told him what I would do."

Reflex "A" (Dominate, Direct, Command, Diagnostic Probe, Independent Behavior)

Therapist and client "A"

1. Therapist or client changes subject, begins new topic.

Note: Occasionally, a change of subject should not be rated "A." Example:

C: "Yes, I do have finals next week. (Pause.)
I hate you."

"A" vs. "Others"

In this example, strong emotion is expressed in the change of subject. In this case, the rating would be "L"... "E."

2. Therapist asks questions of an information-gathering kind.

Example:

T: "How old are you?"

3. Therapist or client is dominating, bossy. Example:

T: "Do your studying between three and six o'clock."

(When no advice was asked for.)

Client-to-other "A."

C: "I said, 'Judy, quit school and go to work.'"

C: "I decided to leave my parents, because I felt like
it was time for me to stop depending on them so much."

APPENDIX 5

INTERPERSONAL THEME ANALYSIS TECHNIQUE (ITAT)
TAPE ANALYSIS FORM

ENCOUNTER GROUP RESEARCH PROJECT

TAPE ANALYSIS

TAPE NO. (Gp & Session)	SEGMENT SAMPLED (1, 2, 3)	SAMPLE SIZE (Minutes)	(Counter Interval)	TAPE ANALYST
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___
Unit # _____	ACTOR L ___ Male M ___ Fem. M ___	Do/Su ___	Af/Di ___ Reflex ___ or Unclass ___	Unintell ___

APPENDIX 6

A TENTATIVE SCALE FOR RATING GROUP LEADER BEHAVIOR:
THE LEADER INTERPERSONAL BEHAVIOR SCALE (LIBS)

This method of categorizing and comparing the behavior of encounter and therapy group leaders was derived from the Interpersonal Theme Analysis Technique (ITAT). The same principles and rules apply. The rating categories (reflexes) have been grouped differently.

Aim: To identify accurately the emotional state the leader is attempting to establish; to identify the theme of the leader's interpersonal behavior.

Ctr #	Dominant Disaffiliative Themes Punishing (D-E) Distancing (B-C)	Dominant Affiliative Themes Teaching (A-P) Supporting(N-O) OR	Submissive Themes Affiliative/Disaffiliative
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi
_____	P.....D	T.....S	SuAf.....SuDi

APPENDIX 7

INTERPERSONAL THEMES IN AN EARLY (I) AND LATE (II) SESSION:
A QUADRANT ANALYSIS USING
ALL (MEMBER & LEADER) STATEMENTS AND MEMBER STATEMENTS

Transformed and Untransformed Proportions

Group	All (Member & Leader) Statements		Member Statements Only	
	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation*	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation
A1-I				
Quadrant				
1	.143	.7670	.132	.7377
2	.204	.9273	.263	1.0701
3	.286	1.1374	.368	1.3078
4	.367	1.3038	.237	1.0239
Reflexes				
Rated	n=49		n=38	
A2-I				
Quadrant				
1	.125	.7377	.154	.7954
2	.125	.7377	.205	.9521
3	.359	1.2870	.564	1.6911
4	.391	1.3490	.077	.5735
Reflexes				
Rated	n=64		n=39	
A3-I				
Quadrant				
1	.428	1.4303	.514	1.5908
2	.061	.4949	.081	.5735
3	.143	.7670	.189	.9021
4	.367	1.3078	.216	.9764
Reflexes				
Rated	n=49		n=37	
P1-I				
Quadrant				
1	.378	1.3284	.405	1.3898
2	.111	.6761	.054	.4510
3	.355	1.2870	.351	1.2661
4	.155	.8230	.108	.6761
Reflexes				
Rated	n=45		n=37	
P2-I				
Quadrant				
1	.255	1.0701	.324	1.2025
2	.191	.9021	.265	1.0928
3	.255	1.0701	.353	1.2661
4	.298	1.1593	.059	.4949
Reflexes				
Rated	n=47		n=34	

Group	All (Member & Leader) Statements		Member Statements Only	
	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation
P3-I				
Quadrant				
1	.386	1.3490	.409	1.3898
2	.088	.6094	.114	.6761
3	.263	1.0701	.318	1.2025
4	.263	1.0701	.159	.8230
Reflexes				
Rated	n=57		n=44	
A1-II				
Quadrant				
1	.111	.6761	.208	.9521
2	.133	.7377	.250	1.0472
3	.244	1.0239	.458	1.4907
4	.511	1.5908	.083	.5735
Reflexes				
Rated	n=45		n=24	
A2-II				
Quadrant				
1	.413	1.3898	.469	1.5108
2	.020	.2838	.063	.4949
3	.255	1.0701	.344	1.2451
4	.294	1.1374	.125	.7377
Reflexes				
Rated	n=51		n=32	
A3-II				
Quadrant				
1	.365	1.3078	.515	1.6108
2	.058	.4949	.091	.6094
3	.096	.6435	.152	.7954
4	.481	1.5308	.242	1.0239
Reflexes				
Rated	n=52		n=33	
P1-II				
Quadrant				
1	.535	1.6509	.553	1.6710
2	.209	.9521	.211	.9521
3	.163	.8230	.158	.8230
4	.093	.6094	.079	.5735
Reflexes				
Rated	n=43		n=38	

Group	All (Member & Leader) Statements		Member Statements Only	
	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation	Proportion	$\sqrt{\text{Arc Sine}}$ Transformation
P2-II				
Quadrant				
1	.261	1.0701	.343	1.2451
2	.152	.7954	.200	.9273
3	.174	.8500	.229	1.0004
4	.413	1.3898	.229	1.0004
Reflexes				
Rated	n=46		n=35	
P3-II				
Quadrant				
1	.333	1.2239	.409	1.3898
2	.092	.6094	.114	.6761
3	.259	1.0701	.295	1.1593
4	.315	1.2025	.182	.8763
Reflexes				
Rated	n=54		n=44	

Note. -- Quadrant 1 = BCDE (Dominant-Disaffiliative); Quadrant 2 = FGHI (Submissive-Disaffiliative); Quadrant 3 = JKLM (Submissive-Affiliative); Quadrant 4 = NOPA (Dominant-Affiliative).

* Table of $\sqrt{\text{Arc Sine}}$ transformation values in Winer (1962).

APPENDIX 8

SUBJECTS' EDWARDS PERSONAL PREFERENCE SCHEDULE SCORES:
PRETEST, POSTTEST, AND DIFFERENCE SCORES

Active Condition (N = 24)

Group A1

S #	S's		(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)SUC
	Sex									
1	I	M	56	55	36	52	40	68	36	76
	II	M	46	47	40	40	56	71	44	83
	D		-10	- 8	+ 4	-12	+16	+ 3	+ 8	+ 7
4	I	F	28	19	40	55	70	59	39	56
	II	F	26	25	45	60	59	69	51	58
	D		- 2	+ 6	+ 5	+ 5	-11	+10	+12	+ 2
5	I	F	78	46	52	55	49	37	45	51
	II	F	57	49	47	57	49	39	58	42
	D		-21	+ 3	- 5	+ 2	0	+ 2	+13	- 9
8	I	F	43	30	33	46	63	56	47	60
	II	F	38	44	38	55	59	59	43	53
	D		- 5	+14	+ 5	+ 9	- 4	+ 3	- 4	- 7
9	I	M	46	49	40	46	63	50	65	51
	II	M	53	38	38	52	67	55	61	48
	D		+ 7	-11	- 2	+ 6	+ 4	+ 5	- 4	- 3
10	I	M	44	41	38	46	47	57	67	65
	II	M	53	44	38	40	65	59	52	46
	D		+ 9	+ 3	0	- 6	+18	+ 2	-15	-19
11	I	F	38	25	40	41	65	66	43	56
	II	F	43	30	38	44	72	66	41	58
	D		+ 5	+ 5	- 2	+ 3	+ 7	0	- 2	+ 2
12	I	M	34	41	36	49	58	57	48	57
	II	M	29	41	40	49	65	57	52	55
	D		- 5	0	+ 4	0	+ 7	0	+ 4	- 2

n = 8

Note. -- Scale abbreviations stand for (1) Achievement, (2) Deference, (3) Order, (4) Exhibition, (5) Autonomy, (6) Affiliation, (7) Intra-reception, (8) Succorance, (9) Dominance, (10) Abasement, (11) Nurturance, (12) Change, (13) Endurance, (14) Heterosexuality, (15) Aggression, (16) Consistency, (17) Dependency [(2) + (8) - (5) = (17)].
 Row entries are (I) Pretest T scores, (II) Posttest T scores, (D) Difference Scores [(II) - (I) = (D)].

Group A1

S #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
1 I	41	41	69	49	30	54	53	53
II	49	39	71	40	41	43	40	58
D	+ 8	- 2	+ 2	- 9	+11	-11	-13	+ 5
4 I	63	44	47	60	43	68	53	63
II	56	44	69	50	37	55	47	68
D	- 7	0	+22	-10	- 6	-13	- 6	+ 5
5 I	56	58	29	43	47	53	49	57
II	63	60	40	45	53	48	42	51
D	+ 7	+ 2	+11	+ 2	+ 6	- 5	- 7	- 6
8 I	37	54	67	52	49	64	42	51
II	34	58	65	52	41	70	40	29
D	- 3	+ 4	- 2	0	- 8	+ 6	+ 2	-22
9 I	31	56	52	59	39	52	48	58
II	33	64	60	38	47	49	44	42
D	+ 2	+ 8	+ 8	-21	+ 8	- 3	- 4	-16
10 I	39	47	75	59	36	38	48	53
II	43	37	60	55	45	65	42	37
D	+ 4	-10	- 5	- 4	+ 9	+27	- 6	-16
11 I	56	40	51	58	47	59	60	63
II	52	30	51	62	45	53	64	57
D	- 4	-10	0	+ 4	- 2	- 6	+ 4	- 6
12 I	49	58	69	53	37	52	48	58
II	57	54	71	59	34	31	57	47
D	+ 8	- 4	+ 2	+ 6	- 3	-21	+ 9	-11

Group A1

<u>S</u> #	(17)DPY
1 I	91
II	74
D	-17
4 I	5
II	24
D	+19
5 I	48
II	42
D	-- 6
8 I	27
II	38
D	+11
9 I	37
II	27
D	-10
10 I	59
II	25
D	-34
11 I	16
II	16
D	0
12 I	40
II	31
D	-- 9

Group A2

S #	S's Sex	(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)SUC
2	I M	70	47	36	35	49	62	56	65
	II M	63	47	33	29	38	68	54	53
	D	- 7	0	- 3	- 6	-11	+ 6	- 2	-12
3	I F	45	33	36	49	84	49	54	69
	II F	50	30	33	49	82	47	47	58
	D	+ 5	- 3	- 3	0	- 2	- 2	- 7	-11
4	I F	38	35	49	44	59	59	47	56
	II F	35	27	31	44	54	56	60	69
	D	- 3	- 8	-18	0	- 5	- 3	+13	+13
5	I F	45	44	33	44	49	66	66	38
	II F	45	41	36	46	59	69	62	40
	D	0	- 3	+ 3	+ 2	+10	+ 3	- 4	+ 2
6	I M	58	36	45	49	47	45	59	59
	II M	39	63	49	46	51	38	54	53
	D	-19	+27	+ 4	- 3	+ 4	- 7	- 5	- 6
7	I M	51	41	38	55	56	64	57	53
	II M	61	30	31	66	63	59	52	55
	D	+10	-11	- 7	+11	+ 7	- 5	- 5	+ 2
8	I M	31	38	40	46	63	57	52	70
	II M	46	24	36	63	74	52	46	65
	D	+15	-14	- 4	+17	+11	- 5	- 6	- 5
9	I M	70	55	63	35	63	34	54	57
	II M	65	49	45	43	72	32	56	46
	D	- 5	- 6	-18	+ 8	+ 9	- 2	+ 2	-11

n = 8

Group A2

<u>S</u> #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
2 I	35	45	67	45	37	47	55	53
II	31	54	69	45	51	54	57	47
D	- 4	+ 9	+ 2	0	+14	+ 7	+ 2	- 6
3 I	30	38	45	52	35	62	68	40
II	41	32	54	62	37	59	68	63
D	+11	- 6	+ 9	+10	+ 2	- 3	0	+23
4 I	34	58	49	43	55	70	47	51
II	52	48	54	39	39	75	57	63
D	+18	-10	+ 5	- 4	-16	+ 5	+10	+12
5 I	54	44	74	52	55	44	42	68
II	50	40	72	58	47	44	44	68
D	- 4	- 4	- 2	+ 6	- 8	0	+ 2	0
6 I	39	43	44	49	56	62	53	53
II	45	54	52	49	58	51	46	21
D	+ 6	+11	+ 8	0	+ 2	-11	- 7	-32
7 I	51	39	52	68	32	49	46	42
II	43	43	54	64	37	45	50	53
D	- 8	+ 4	+ 2	- 4	+ 5	- 4	+ 4	+11
8 I	33	45	67	62	30	54	59	47
II	43	43	67	53	32	49	57	63
D	+10	- 2	0	- 9	+ 2	- 5	- 2	+16
9 I	29	52	50	53	60	40	37	47
II	43	47	37	43	70	47	53	58
D	+14	- 5	-13	-10	+10	+ 7	+16	+11

Group A2

<u>S</u> #	(17) DPY
2 I	63
II	62
D	- 1
3 I	18
II	6
D	-12
4 I	32
II	42
D	+10
5 I	33
II	22
D	-11
6 I	48
II	65
D	+17
7 I	38
II	22
D	-16
8 I	45
II	15
D	-30
9 I	49
II	23
D	-26

Group A3

S #	S's		(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)SUC
	Sex									
1	I	F	45	41	52	52	61	54	60	58
	II	F	45	25	43	55	65	49	68	58
	D		0	-16	-9	+3	+4	-5	+8	0
2	I	F	35	54	63	55	54	42	71	49
	II	F	52	33	47	52	59	51	64	42
	D		+17	-16	-16	-3	+5	+9	-7	-7
3	I	M	29	52	43	46	76	55	56	48
	II	M	27	47	43	63	72	57	52	59
	D		-2	-5	0	+17	-4	+2	-4	+11
4	I	M	41	47	36	43	56	45	44	65
	II	M	51	49	29	49	63	50	52	42
	D		+10	+2	-7	+6	+7	+5	+8	-23
5	I	M	56	38	40	40	65	41	71	36
	II	M	46	47	38	32	76	38	69	38
	D		-10	+9	-2	-8	+11	-3	-2	+2
6	I	M	41	38	52	52	40	52	65	42
	II	M	53	30	40	60	38	52	67	48
	D		+12	-8	-12	+8	-2	0	+2	+6
8	I	F	43	25	40	38	68	34	62	53
	II	F	35	25	36	41	72	37	58	42
	D		-8	0	-4	+3	+4	+3	-4	-11
12	I	M	46	41	38	49	63	43	57	53
	II	M	39	41	40	49	67	43	54	55
	D		-7	0	+2	0	+4	0	-3	+2

n = 8

Group A3

S #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
1 I	34	46	54	60	43	46	47	51
II	34	58	58	58	45	40	47	40
D	0	+12	+ 4	- 2	+ 2	- 6	0	-11
2 I	52	34	45	56	37	51	55	51
II	58	30	47	54	41	53	62	63
D	+ 6	- 4	+ 2	- 2	+ 4	+ 2	+ 7	+12
3 I	35	43	50	66	36	63	50	58
II	31	39	44	62	36	69	53	68
D	- 4	- 4	- 6	- 4	0	+ 6	+ 3	+10
4 I	41	54	46	59	41	58	70	47
II	31	52	60	57	45	62	57	68
D	-10	- 2	+14	- 2	+ 4	+ 4	-13	+21
5 I	45	58	52	62	49	36	57	58
II	45	45	58	64	43	51	53	68
D	0	-13	+ 6	+ 2	- 6	+15	- 4	+10
6 I	35	76	50	51	51	45	55	58
II	51	70	44	51	47	40	55	58
D	+16	- 6	- 6	0	- 4	- 5	0	0
8 I	54	52	58	39	43	57	75	51
II	54	56	56	45	41	64	77	57
D	0	+ 4	- 2	+ 6	- 2	+ 7	+ 2	+ 6
12 I	45	43	48	68	37	63	50	47
II	43	45	42	74	36	65	55	47
D	- 2	+ 2	- 6	+ 6	- 1	+ 2	+ 5	0

Group A3

S #	(17)DFY
1 I	38
II	18
D	-20
2 I	49
II	21
D	-28
3 I	24
II	34
D	+10
4 I	56
II	28
D	-28
5 I	9
II	9
D	0
6 I	40
II	40
D	0
8 I	10
II	-5
D	-15
12 I	31
II	29
D	- 2

Passive Condition (N = 26)

Group P1

S #	S's Sex	(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)SUC
1	I M	46	24	36	40	58	50	46	48
	II M	46	22	31	43	58	52	46	51
	D	0	- 2	- 5	+ 3	0	+ 2	0	+ 3
2	I F	45	57	40	46	63	59	41	53
	II F	35	54	31	49	65	64	56	60
	D	-10	- 3	- 9	+ 3	+ 2	+ 5	+15	+ 7
3	I F	57	44	63	55	54	49	68	44
	II F	52	41	59	49	49	54	71	53
	D	- 5	- 3	- 4	- 6	- 5	+ 5	+ 3	+ 9
6	I F	45	52	47	52	56	56	56	51
	II F	38	46	40	52	56	59	49	51
	D	- 7	- 6	- 7	0	0	+ 3	- 7	0
7	I M	44	38	38	57	54	71	56	44
	II M	53	38	36	49	49	68	59	46
	D	+ 9	0	- 2	- 8	- 5	- 3	+ 3	+ 2
8	I M	44	33	31	63	63	55	61	55
	II M	46	33	31	55	69	52	63	59
	D	+ 2	0	0	- 8	+ 6	- 3	+ 2	+ 4
9	I F	28	33	38	41	77	59	62	60
	II F	38	44	36	46	75	49	64	60
	D	+10	+11	- 2	+ 5	- 2	-10	+ 2	0
10	I F	45	30	38	52	45	37	54	51
	II F	47	46	33	46	54	39	51	58
	D	+ 2	+16	- 5	- 6	+ 9	+ 2	- 3	+ 7
11	I M	44	38	33	49	63	62	63	65
	II M	44	36	40	43	69	57	65	57
	D	0	- 2	+ 7	- 6	+ 6	- 5	+ 2	- 8
12	I M	51	41	36	49	45	55	63	70
	II M	46	58	49	46	58	66	59	57
	D	- 5	+17	+13	- 3	+13	+11	- 4	-13

n = 10

Group P1

S #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
1 I	51	56	54	66	53	54	57	53
II	53	56	56	68	54	56	46	53
D	+ 2	0	+ 2	+ 2	+ 1	+ 2	-11	0
2 I	45	36	67	43	53	57	47	57
II	39	44	69	52	47	46	42	63
D	- 6	+ 8	+ 2	+ 9	- 6	-11	- 5	+ 6
3 I	47	46	40	29	80	38	36	57
II	45	50	51	35	62	42	36	57
D	- 2	+ 4	+11	+ 6	-18	+ 4	0	0
6 I	41	36	72	50	55	55	29	35
II	43	52	74	54	47	57	31	29
D	+ 2	+16	+ 2	+ 4	- 8	+ 2	+ 2	- 6
7 I	49	35	69	47	51	56	40	53
II	51	29	69	40	51	58	48	47
D	+ 2	- 6	0	- 7	0	+ 2	+ 8	- 6
8 I	45	54	58	59	34	56	37	63
II	41	43	56	64	41	51	42	58
D	- 4	-11	- 2	+ 5	+ 7	- 5	+ 5	- 5
9 I	26	68	65	54	43	53	38	63
II	32	62	63	50	29	53	49	57
D	+ 6	- 6	- 2	- 4	-14	0	+11	- 6
10 I	50	62	45	66	43	61	64	57
II	43	60	56	58	37	53	64	57
D	- 7	- 2	+11	- 8	- 6	- 8	0	0
11 I	29	45	64	53	36	54	48	63
II	29	45	58	51	32	52	68	68
D	0	0	- 6	- 2	- 4	- 2	+20	+ 5
12 I	49	66	52	51	28	51	42	58
II	33	52	67	40	47	45	29	58
D	-16	-14	+15	-11	+19	- 6	-13	0

Group P1

S #	(17)DFY
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1 I	14
II	15
D	+ 1

2 I	47
II	49
D	+ 2

3 I	34
II	45
D	+11

6 I	47
II	41
D	- 6

7 I	28
II	35
D	+ 7

8 I	25
II	23
D	- 2

9 I	16
II	29
D	+13

10 I	36
II	50
D	+14

11 I	40
II	24
D	-16

12 I	66
II	57
D	- 9

Group P2

S #	S's Sex	(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)SUC
1	I F	57	30	31	52	61	54	49	42
	II F	55	19	36	55	72	51	49	38
	D	- 2	-11	+ 5	+ 3	+11	- 3	0	- 4
2	I M	41	36	38	74	49	57	56	63
	II M	53	55	40	52	63	55	56	61
	D	+12	+19	+ 2	-22	+14	- 2	0	- 2
4	I M	56	61	61	35	74	45	46	44
	II M	51	44	54	43	63	55	46	59
	D	- 5	-17	- 7	+ 8	-11	+10	0	+15
5	I M	39	41	43	40	56	66	59	72
	II M	41	47	47	29	49	57	63	72
	D	+ 2	+ 6	+ 4	-11	- 7	+ 9	+ 4	0
6	I F	47	38	40	55	54	56	41	74
	II F	64	27	33	66	56	56	34	76
	D	+17	-11	- 7	+11	+ 2	0	- 7	+ 2
7	I F	40	44	31	49	54	56	56	47
	II F	50	49	38	44	54	56	64	47
	D	+10	+ 5	+ 7	- 5	0	0	+ 8	0
8	I F	52	46	38	55	49	56	37	67
	II F	67	38	43	44	61	44	51	58
	D	+15	- 8	+ 5	-11	+12	-12	+14	- 9
10	I M	39	36	52	72	67	32	50	42
	II M	46	61	54	43	51	57	34	65
	D	+ 7	+25	+ 2	-29	-16	+25	-16	+23
11	I M	58	27	43	52	54	68	48	59
	II M	46	27	36	60	51	62	54	63
	D	-12	0	- 7	+ 8	- 3	- 6	+ 6	+ 4

n = 9

Group P2

S #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
1 I	41	58	60	66	43	51	51	57
II	52	50	67	62	41	48	53	63
D	+11	- 8	+ 7	- 4	- 2	- 3	+ 2	+ 6
2 I	45	37	62	53	32	51	59	63
II	41	27	71	43	39	49	50	47
D	- 4	-10	+ 9	-10	+ 7	- 2	- 9	-16
4 I	35	52	52	45	54	51	42	53
II	37	50	58	43	56	52	37	63
D	+ 2	- 2	+ 6	- 2	+ 2	+ 1	- 5	+10
5 I	37	50	58	43	39	69	31	68
II	33	50	67	55	30	67	35	47
D	- 4	0	+ 9	+12	- 9	- 2	+ 4	-21
6 I	26	62	56	45	33	70	51	63
II	45	54	47	35	29	64	64	40
D	+19	- 8	- 9	-10	- 4	- 6	+13	-23
7 I	34	60	65	64	37	51	60	46
II	32	54	69	52	35	51	55	51
D	- 2	- 6	+ 4	-12	- 2	0	- 5	+ 5
8 I	43	42	49	48	49	64	53	46
II	47	46	42	35	56	59	55	24
D	+ 4	+ 4	- 7	-13	+ 7	- 5	+ 2	-22
10 I	45	54	44	59	34	58	70	53
II	37	62	48	40	49	49	57	21
D	- 8	+ 8	+ 4	-19	+15	- 9	-13	-32
11 I	57	31	50	55	32	65	48	47
II	57	33	48	62	32	67	48	63
D	0	+ 2	- 2	+ 7	0	+ 2	0	+16

Group P2

<u>S #</u>	(17)DPY
1 I	11
II	-15
D	-26
2 I	50
II	53
D	+ 3
4 I	31
II	40
D	+ 9
5 I	57
II	70
D	+13
6 I	58
II	47
D	-11
7 I	37
II	42
D	+ 5
8 I	64
II	35
D	-29
10 I	11
II	75
D	+64
11 I	32
II	39
D	+ 7

Group P3

<u>S</u> #	<u>S</u> 's <u>Sex</u>	(1)ACH	(2)DEF	(3)ORD	(4)EXH	(5)AUT	(6)AFF	(7)INT	(8)Suc
1 I	M	58	49	47	43	56	55	50	57
II	M	70	44	45	43	60	50	44	55
D		+12	- 5	- 2	0	+ 4	- 5	- 6	- 2
3 I	M	51	55	38	57	54	45	59	59
II	M	51	52	36	49	63	45	48	61
D		0	- 3	- 2	- 8	+ 9	0	-11	+ 2
5 I	F	57	57	56	57	47	64	47	35
II	F	52	49	65	41	42	56	66	40
D		- 5	- 8	+ 9	-16	- 5	- 8	+19	+ 5
6 I	F	38	38	38	74	61	54	60	47
II	F	45	38	38	52	47	51	49	65
D		+ 7	0	0	-22	-14	- 3	-11	+18
7 I	M	44	38	40	57	49	59	31	61
II	M	46	38	38	63	58	55	38	59
D		+ 2	0	- 2	+ 6	+ 9	- 4	+ 7	- 2
8 I	M	36	44	36	52	72	57	46	48
II	M	31	49	43	35	65	68	46	68
D		- 5	+ 5	+ 7	-17	- 7	+11	0	+20
12 I	F	44	47	47	40	45	48	46	55
II	F	62	52	70	41	65	32	39	53
D		+18	+ 5	+23	+ 1	+20	-16	- 7	- 2

n = 7

Group P3

S #	(9)DOM	(10)ABA	(11)NUR	(12)CHG	(13)END	(14)HET	(15)AGG	(16)CON
1 I	33	56	52	53	49	60	31	63
II	22	52	48	70	51	60	35	58
D	-11	- 4	- 4	+17	+ 2	0	+ 4	- 5
3 I	49	35	54	57	41	49	46	42
II	61	33	42	57	53	62	35	58
D	+12	- 2	-12	0	+12	+13	-11	+16
5 I	54	44	40	48	43	53	53	40
II	56	28	56	39	51	59	49	29
D	+ 2	-16	+16	- 9	+ 8	+ 6	- 4	-11
6 I	54	50	47	60	37	44	53	63
II	52	72	69	48	39	44	40	57
D	- 2	+22	+22	-12	+ 2	0	-13	- 6
7 I	63	50	48	49	45	56	59	42
II	65	43	58	45	37	51	57	47
D	+ 2	- 7	+10	- 4	- 8	- 5	- 2	+ 5
8 I	24	60	46	66	49	58	50	42
II	24	50	50	74	49	51	44	53
D	0	-10	+ 4	+ 8	0	- 7	- 6	+11
12 I	39	70	56	57	54	49	48	31
II	34	52	40	39	53	49	68	12
D	- 5	-18	-16	-18	- 1	0	+20	-19

Group P3

<u>S #</u>	(17)DPY
1 I	50
II	39
D	-11
3 I	60
II	50
D	-10
5 I	45
II	47
D	+ 2
6 I	24
II	56
D	+32
7 I	50
II	39
D	-11
8 I	20
II	52
D	+32
12 I	57
II	40
D	-17

REFERENCES

- Alexander, J.F. & Abeles, N. Dependency changes in psychotherapy as related to interpersonal relationships. Journal of Consulting and Clinical Psychology, 1968, 32, 685-689.
- Alexander, J.F. & Abeles, N. Psychotherapy process: Sex differences and dependency. Journal of Counseling Psychology, 1969, 16, 191-196.
- Anderson, A.R. Group counseling. Review of Educational Research, 1969, 39, 209-226.
- Anker, J.M. & Walsh, R.P. Group psychotherapy, a special activity program, and group structure in the treatment of chronic schizophrenia. Journal of Consulting Psychology, 1961, 25, 476-481. Cited by E. M. Pattison, Evaluation studies of group psychotherapy. International Journal of Group Psychotherapy, 1965, 15, 382-393.
- Ashby, J.D., Ford, D.H., Guernsey, B.G., Jr., & Guernsey, L.F. Effects on clients of a reflective and a leading type of psychotherapy. Psychological Monographs: General and Applied, 1957, 71 (24, Whole No. 453).
- Bednar, R.L. Group psychotherapy research variables. International Journal of Group Psychotherapy, 1970, 20, 146-152.
- Benne, K.D. From polarization to paradox. In L. F. Bradford, J. R. Gibb, & K. D. Benne (Eds.), T-Group theory and laboratory method. New York: Wiley, 1964, 216-247. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Bennis, W.G. Patterns and vicissitudes in T-Group development. In L. P. Bradford, J. R. Gibb, & K. D. Benne (Eds.), T-Group theory and laboratory method. New York: Wiley, 1964, 80-135. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Bennis, W.E. & Shepard, H.A. A theory of group development. Human Relations, 1956, 9, 415-457.

- Bernardin, A.C. & Jessor, R. A construct validation of the Edwards Personal Preference Schedule with respect to dependency. Journal of Consulting Psychology, 1957, 21, 63-67.
- Bernstein, A. The psychoanalytic technique. In B. B. Wolman (Ed.), Handbook of Clinical Psychology. New York: McGraw Hill, 1965, 1168-1199. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Blake, R.R. Studying group action. In L. P. Bradford, J. R. Gibb, & K. D. Benne (Eds.), T-Group theory and laboratory method. New York: Wiley, 1964, 336-364. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Burton, A. (Ed.). Encounter: The theory and practice of encounter groups. San Francisco, Calif.: Jossey-Bass, 1969.
- Campbell, J.P. & Dunnette, M.D. Effectiveness of T-Group experiences in managerial training and development. Psychological Bulletin, 1968, 70, 73-104.
- Carikhuff, R.D. & Truax, C.B. Toward effective counseling and psychotherapy: Training and practice. Chicago: Aldine, 1967.
- Cartwright, D.S., Kirtner, W.L., & Fiske, D.W. Method factors in changes associated with psychotherapy. Journal of Abnormal and Social Psychology, 1963, 66, 164-175.
- Chestnut, W. & Gilbreath, S. Differential group counseling with male college underachievers: A 3-year follow up. Journal of Counseling Psychology, 1969, 16, 365-367.
- Chinsky, J.M. & Rappaport, J. Brief critique of the meaning and reliability of "Accurate Empathy" ratings. Psychological Bulletin, 1970, 73, 379-382.
- Coffey, H., Freedman, M., Leary, T., & Ossorio, A. Results and implications of the group psychotherapy program. Journal of Social Issues, 1950, 6, 37-44.
- Coghill, M.A. Sensitivity training: A review of the controversy. Key Issues Series, 1, Ithaca, N.Y., Industrial and Labor Relations Library, 1967.
- Coons, W.H. Interaction and insight in group psychotherapy. Canadian Journal of Psychology, 1957, 11, 1-8. In G. E. Stollak, B. G. Guerney, Jr., & M. Rothberg, Psychotherapy research: Selected readings. Chicago: Rand McNally, 1966, 163-168.

- Crowder, J. Personal communication, 1970.
- Culbert, S.A. Trainer self-disclosure and member growth in two T groups. Journal of Applied Behavioral Science, 1968, 4, 47-73.
- Dickenson, W.A. & Truax, C.B. Group counseling with underachievers. Personnel and Guidance Journal, 1966, 45, 243-247.
- Edwards, A.L. Edwards Personal Preference Schedule: Manual (Revised). New York: Psychological Corp., 1959.
- Edwards, A.L. & Cronbach, L.J. Experimental design for research in psychotherapy. Journal of Clinical Psychology, 1952, 8, 51-59.
- Egan, G. Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Exner, J.E., Jr. Therapist attendance as a variable in group psychotherapy. Paper presented at the meeting of the Midwestern Psychological Association, May, 1965. In G. E. Stollak, B. G. Guerney, Jr., & M. Rothberg, Psychotherapy research: Selected readings. Chicago: Rand McNally, 1966, 372-376.
- Exner, J.E., Jr. Personal communication, 1970.
- Fagan, J. The tasks of the therapist. In J. Fagan and I. L. Shepherd (Eds.), Gestalt therapy now. Palo Alto: Science and Behavior Books, 1970, 88-106.
- Fagan, J., & Shepherd, I.L. Gestalt therapy now. Palo Alto: Science and Behavior Books, 1970.
- Fiedler, F.E. A comparison of therapeutic relationships in psychoanalytic, nondirective, and Adlerian therapy. Journal of Consulting Psychology, 1950, 14, 436-445. (a)
- Fiedler, F.E. The concept of an ideal therapeutic relationship. Journal of Consulting Psychology, 1950, 14, 239-245. (b)
- Freedman, M.B., Leary, T.F., Ossorio, A.G., & Coffey, H.A. The interpersonal dimension of personality. Journal of Personality, 1951, 20, 143-161.
- Garwood, D.S. The significance and dynamics of sensitivity training programs. International Journal of Group Psychotherapy, 1967, 17, 457-472.

- Gibb, J.R. The present status of T-Group theory. In L. P. Bradford, J. R. Gibb, & K. D. Benne (Eds.), T-Group theory and laboratory method. New York: Wiley, 1964, 168-189. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.
- Gilbreath, S.H. Group counseling, dependence, and college male underachievement. Journal of Counseling Psychology, 1967, 14, 449-453.
- Gisvold, D. A validity study of the autonomy and deference subscales of the Edwards Personal Preference Schedule. Journal of Counseling Psychology, 1958, 22, 445-447.
- Goldberg, C. Review of J. Mann, Encounter: A weekend with intimate strangers. Psychiatry and Social Science Review, 1970, 4, 2-7.
- Goldman, J.R. The relation of certain therapist variables to the handling of psychotherapeutic events. (Doctoral dissertation, Stanford University.) Ann Arbor, Mich.: University Microfilms, 1961. No. 62-1715.
- Goldstein, A.P. & Dear, S.J. The investigation of psychotherapy: Commentaries and readings. New York: Wiley, 1966.
- Goldstein, A.P., Heller, D., & Sechrest, L.B. Psychotherapy and the psychology of behavior change. New York: Wiley, 1966.
- Gordon, J.E. Leading and following psychotherapeutic techniques with hypnotically induced repression and hostility. Journal of Abnormal and Social Psychology, 1957, 54, 405-410.
- Greenwald, H. (Ed.). Active Psychotherapy. New York: Atherton Press, 1967.
- Guernsey, B.J., Jr. Client dependency, guardedness, openness, and resistance in a reflective and in a leading psychotherapy. (Doctoral dissertation, Penn State University.) Ann Arbor, Mich.: University Microfilms, 1956. No. 16-714.
- Gundlach, R.H. Outcome studies in group psychotherapy. International Journal of Group Psychotherapy, 1967, 17, 196-210. Cited by A. R. Anderson, Group counseling. Review of Educational Research, 1969, 39, 209-226.
- Harrow, M., Astrachan, B.M., Becker, R.E., Miller, J.C., & Schwartz, A. Influence of the psychotherapist on the emotional climate in group therapy. Human Relations, 1967, 20, 49-64. Cited by G. Egan, Encounter: Group processes for interpersonal growth. Belmont, Calif.: Wadsworth, 1970.

- Hartley, E. & Rosenbaum, M. Criteria used by group psychotherapists for judging improvement in patients. International Journal of Group Psychotherapy, 1963, 13, 80-83. Cited by E. M. Pattison, Evaluation studies of group psychotherapy. International Journal of Group Psychotherapy, 1965, 15, 382-393.
- Heilbrun, A.B., Jr. Toward resolution of the dependency-premature termination paradox for females in psychotherapy. Journal of Consulting and Clinical Psychology, 1970, 34, 382-386.
- Heller, K. & Goldstein, A.P. Client dependency and therapist expectancy as relationship maintaining variables in psychotherapy. Journal of Consulting Psychology, 1961, 25, 371-375.
- Hill, W.F. Group psychotherapy: Collected papers in practice, theory and research. Provo.: Utah State Hospital Press, 1961. Cited by A. R. Anderson, Group counseling. Review of Educational Research, 1969, 39, 209-226.
- Hunt, J. McV. Concerning the impact of group psychotherapy on psychology. International Journal of Group Psychotherapy, 1964, 14, 3-31.
- Karson, S., & Wiedershine, L.J. An objective evaluation of dynamically oriented group psychotherapy. International Journal of Group Psychotherapy, 1961, 11, 166-174.
- Kiesler, D.J. Some myths of psychotherapy research and the search for a paradigm. Psychological Bulletin, 1966, 65, 110-136. Cited by J. F. Alexander & N. Abeles, Dependency changes in psychotherapy as related to interpersonal relations. Journal of Consulting and Clinical Psychology, 1968, 32, 685-689.
- LaForge, R. & Suczek, R. The interpersonal dimension of personality. III. An interpersonal checklist. Journal of Personality, 1955, 24, 94-112.
- LaForge, R., Leary, T.F., Naboisek, H., Coffey, H.S., & Freedman, M.B. The interpersonal dimension of personality: II. An objective study of repression. Journal of Personality, 1954, 23, 129-153.
- Land, E.C. A comparison of patient improvement resulting from two therapeutic techniques. (Doctoral dissertation, University of Tennessee.) Ann Arbor, Mich.: University Microfilms, 1963. No. 64-7862.
- Leary, T.F. Interpersonal diagnosis of personality. New York: Ronald Press, 1957.
- McGrath, J.E. & Altman, I. Small group research: A synthesis and critique of the field. New York: Holt, Rinehart & Winston, 1966.

- McNair, D.M. & Lorr, M. An analysis of professed therapeutic techniques. Journal of Consulting Psychology, 1964, 28, 265-271.
- Miller, H.R. & Maley, R.F. The accuracy of sampling procedures in studying recorded group psychotherapy sessions. Journal of Clinical Psychology, 1969, 25, 228-230.
- Mueller, W.J. Patterns of behavior and their reciprocal impact in the family and in psychotherapy. Journal of Counseling Psychology, 1969, 16(2, Pt. 2). (a)
- Mueller, W.J. Mapping the psychotherapeutic process through analysis of interpersonal behavior. Paper presented at the meeting of the American Psychological Association, Wash., D.C., September, 1969. (b)
- Mueller, W.J. & Dilling, C.A. Therapist-client interview behavior and personality characteristics of therapists. Journal of Projective Techniques and Personality Assessment, 1968, 32, 281-288.
- Mueller, W.J. & Dilling, C.A. Studying interpersonal themes in psychotherapy research. Journal of Counseling Psychology, 1969, 16, 50-58.
- Murphy, M. Esalen: Where it's at. Psychology Today, 1967, 1(12), 34-39.
- Murray, H.A. Explorations in personality. New York: Oxford University Press, 1938.
- Pattison, E.M. Evaluation studies of group psychotherapy. International Journal of Group Psychotherapy, 1965, 15, 382-393.
- Perls, F.S. Four lectures. In J. Fagan & I. L. Shepherd (Eds.), Gestalt therapy now. Palo Alto: Science and Behavior Books, 1970, 14-38.
- Psathas, G. & Hardert, R. Trainer interventions and normative patterns in the T group. Journal of Applied Behavioral Science, 1966, 2, 149-169.
- Rogers, C.R. Counseling and psychotherapy. New York: Houghton Mifflin, 1942.
- Rogers, C.R. The necessary and sufficient conditions of therapeutic personality change. Journal of Consulting Psychology, 1957, 21, 95-103.
- Rogers, C.R. The process equation of psychotherapy. American Journal of Psychotherapy, 1961, 15, 27-45.

- Rottschäfer, R.H. Client dependency in relation to counselor style and induced client set. (Doctoral dissertation, Southern Illinois University.) Ann Arbor, Mich.: University Microfilms, 1960. No. 61-2082.
- Rottschäfer, R.H. & Renzaglia, G.A. The relationship of dependent-like verbal behaviors to counselor style and induced set. Journal of Consulting Psychology, 1962, 26, 172-177.
- Salzberg, H.C. Manipulation of verbal behavior in a group psychotherapeutic setting. Psychological Reports, 1961, 9, 183-186.
- Salzberg, H.C. Effects of silence and redirection on verbal responses in group psychotherapy. Psychological Reports, 1962, 11, 455-461.
- Salzberg, H.C. Verbal behavior in group psychotherapy with and without a therapist. Journal of Counseling Psychology, 1967, 14, 24-27.
- Schlien, J.M. Comparison of results with different forms of psychotherapy. American Journal of Psychotherapy, 1964, 18 (Suppl. 1), 15-22.
- Schuldt, W.J. Psychotherapists' approach-avoidance responses and clients' expressions of dependency: A longitudinal analysis. (Doctoral dissertation, Michigan State University.) Ann Arbor, Mich.: University Microfilms, 1964. No. 65-2065. Cited by J. F. Alexander & N. Abeles, Dependency changes in psychotherapy as related to interpersonal relationships. Journal of Consulting and Clinical Psychology, 1968, 32, 685-689.
- Segal, B. A-B distinction and therapeutic intervention. Journal of Consulting and Clinical Psychology, 1970, 34, 442-446.
- Seligman, M. & Sterne, D.M. Verbal behavior in therapist-led, leaderless, and alternating group psychotherapy sessions. Journal of Counseling Psychology, 1969, 16, 325-328.
- Shepherd, I.L. Limitations and cautions in the gestalt approach. In J. Fagan & I. L. Shepherd (Eds.), Gestalt therapy now. Palo Alto: Science and Behavior Books, 1970, 234-238.
- Snyder, W.V. Dependency in psychotherapy. New York: Norton, 1963.
- Stock, D. A survey of research on T groups. In L. P. Bradford, J. R. Gibb, & K. D. Benne (Eds.), T-Group theory and laboratory method. New York: Wiley, 1964, 395-441.
- Stollak, G.E., Guernsey, B.G., Jr., & Rothberg, M. Psychotherapy research: Selected readings. Chicago: Rand McNally, 1966.

- Strupp, H.H. A multidimensional comparison of therapist activity in analytic and client-centered therapy. Journal of Consulting Psychology, 1957, 21, 301-308.
- Strupp, H.H. The performance of psychoanalytic and client-centered therapists in an initial interview. Journal of Consulting Psychology, 1958, 22, 265-274.
- Sundland, D.M. & Barker, E.M. The orientation of psychotherapists. Journal of Consulting Psychology, 1962, 26, 201-212.
- Terrill, J.M. & Terrill, R.E. A method for studying family communication. Family Process, 1965, 4, 259-290.
- Thoresen, C.E. Relevance and research in counseling. Review of Educational Research, 1969, 39, 263-281.
- Truax, C.B. Counseling and psychotherapy: Process and outcome. (ARR & TC No. 208), Arkansas Rehabilitation Research and Training Center, University of Arkansas, June, 1966.
- Truax, C.B. & Carkhuff, R.R. Concreteness: A neglected variable in research in psychotherapy. Journal of Clinical Psychology, 1964, 20, 264-267.
- Truax, C.B. & Wargo, D.G. Effects of vicarious therapy pretraining and alternate sessions on outcome in group psychotherapy with outpatients. Journal of Consulting and Clinical Psychology, 1969, 33, 440-447.
- Tuckman, B.W. Developmental sequence in small groups. Psychological Bulletin, 1965, 63, 384-399.
- Ullman, L.P., Krasner, L., & Collins, B.J. Modification of behavior through verbal conditioning: Effects in group therapy. Journal of Abnormal and Social Psychology, 1961, 62, 128-132.
- Wallach, M.S. & Strupp, H.H. Dimensions of psychotherapists' activity. Journal of Consulting Psychology, 1964, 28, 120-125.
- Wile, D.B., Bron, G.D., & Pollack, H.B. Preliminary validation evidence for the Group Therapy Questionnaire. Journal of Consulting and Clinical Psychology, 1970, 34, 367-374.
- Winder, C.L., Ahmad, F.Z., Bandura, A., & Rau, L.C. Dependency of patients, psychotherapist responses, and aspects of psychotherapy. Journal of Consulting Psychology, 1962, 26, 129-134.
- Winer, B.J. Statistical principles in experimental design. New York: McGraw-Hill, 1962.

Zax, M. & Klein, A. Measurement of personality and behavior changes following psychotherapy. Psychological Bulletin, 1960, 57, 435-448.

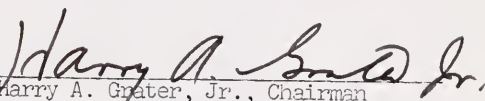
Zuckerman, M. & Grcsz, H.J. Suggestability and dependency. Journal of Consulting Psychology, 1958, 22, 328.

BIOGRAPHICAL SKETCH

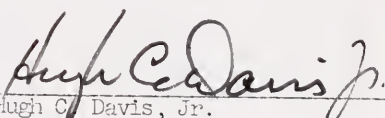
Jeffrey Ira Hutter was born April 14, 1946, in Kew Gardens, New York. In June, 1962, he was graduated from Forest Hills High School. In June, 1966, he was graduated from Queens College of the City University of New York with the degree of Bachelor of Arts in Psychology. In September, 1966, he began graduate work in the University of Florida Department of Psychology. He was a United States Public Health Service Fellow in Clinical Psychology until June, 1967, and a University Graduate Assistant until June, 1968. He was a Veteran's Administration Trainee in Clinical Psychology until June, 1970, when he received the degree of Master of Arts in Psychology, and a Counseling Psychologist at the University of Florida Counseling Center until August, 1970. From September, 1969, until September, 1970, he was an Intern in Clinical Psychology at the J. Hillis Miller Health Center (University of Florida). From September, 1970, until the present time he has pursued his work toward the degree of Doctor of Philosophy.

Jeffrey Ira Hutter is married to the former Rochelle Myra Beyer. He is a member of Psi Chi and past president of the University of Florida chapter.

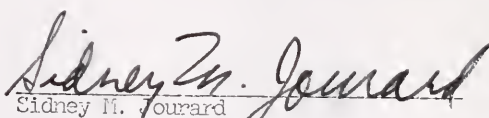
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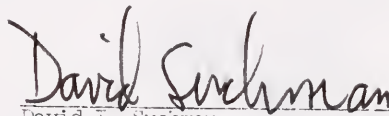
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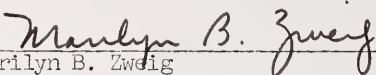
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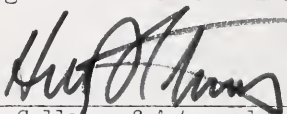

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This dissertation was submitted to the Dean of the College of Arts and Sciences and to the Graduate Council, and was accepted as partial fulfillment of the requirements for the degree of Doctor of Philosophy.

December, 1970


Dean, College of Arts and Sciences

Dean, Graduate School

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